



British Pharmaceutical Students' Association

Feedback in response to the June 2017 GPhC Registration Assessment

11th July 2017
www.bpsa.co.uk



British Pharmaceutical Students' Association
The Official Student Organisation of the Royal Pharmaceutical Society

Introduction

The British Pharmaceutical Students' Association (BPSA) is the official representative body of pharmacy students and pre-registration pharmacists in Great Britain. Established in 1942, the Association aims to support, advocate for and represent trainees on their path towards registration.

As part of this supportive and representative role, the BPSA invites feedback following registration assessments. The June 2017 registration assessment has attracted significant feedback. As of 8th July 2017, 582 e-mails were received via preregexamfeedback@bpsa.co.uk. An overwhelming majority of these consisted of concerns regarding paper 2 of the assessment. The BPSA recognises that this is a significant proportion of candidates who completed the assessment and has responded accordingly.

In 2011, 2013, 2015 and 2016, due to the strong working relationship between the BPSA and General Pharmaceutical Council (GPhC), a summary of collated feedback was presented to the board of assessors. This feedback also included a number of recommendations, all of which were accepted and have led to improvements in the assessment experience for trainees.

Consequently, feedback this year has been reviewed and categorised into themes discussed below. A number of recommendations have also been produced which the BPSA would like to put forward to the GPhC in order to improve the assessment experience for future years.

I hope this report is useful for all stakeholders of the June 2017 assessment, particularly the pre-registration trainees that sat this assessment. Should you have any comments about this report, please do not hesitate to contact me.

BZChaudhry

Beenish Zafar Chaudhry
Pre-registration pharmacist
BPSA Graduate Officer 2017-2018
GraduateOfficer@bpsa.co.uk



1. Environment

1.1. Assessment Centres

A number of candidates responded regarding the environment of the registration assessment sitting at the Excel London venue. Many candidates felt that the assessment venue was an incredibly noisy environment for such an important exam. There were planes flying over the centre every few minutes distracting candidates during the exam, and the number of passersby in and around the venue was off-putting. The loud noise during the assessment meant that candidates found it difficult to remain focused.

This is a concern that has been raised by two previous cohorts and subsequently presented to the GPhC in years 2015 and 2016.

Recommendation 1: The BPSA advises that the assessment centre for London candidates is changed to a quieter and more appropriate venue.

1.2. Desk Space

There were also a number of complaints regarding the amount of desk space for the assessment. One hundred and ten students felt that the amount of desk space provided for the assessment was insufficient, notably during paper 2. Candidates felt that the amount of resources provided during the latter part of the assessment, meant that they spent time moving things around their small desks in order to access the resource, the question paper and answer sheet. This frustrated and distracted candidates, with complaints that this ate into what they felt was insufficient, time.

Recommendation 2: The BPSA recommends that the GPhC takes into consideration the amount of physical space candidates will have during the assessment when producing the resource booklet. The GPhC should consider bigger desks.



2. Paper 1

The feedback regarding paper 1 of the assessment was lower than that of paper 2, with 369 respondents. There were however, recurrent themes that were highlighted from the respondents who commented upon this paper in their feedback.

2.1. Resource Pack

The majority of respondents (350) found that the resource pack for this paper was appropriate, contained relevant information and was overall, 'straight-forward' to navigate. They commented upon it's ease of use and that information was found quickly.

2.2. Content

Three hundred and fifty six candidates were of the view that paper 1 was a fair, yet adequately challenging paper, meeting their expectations in terms of difficulty and applicability to day-to-day practice. It was, however, noted that the paper lacked certain questions that many candidates had anticipated, such as those requiring 'alligation' working methods.

Overall candidates felt 'well prepared' for this assessment, stating the training providers had interpreted the complexity and difficulty of this paper well, allowing them to feel confident whilst sitting this part of the assessment.

2.3. Length of Questions

Although the difficulty of the questions was considered as moderately challenging and answerable by a 'day 1' pharmacist, 356 candidates stated that the wording of the majority of questions was considerably long, resulting in more reading time to understand what was being asked. Candidates commented that questions were of unnecessary length, which resulted in more time being taken to answer each question.

The multi-step nature of almost all questions was commented upon by some candidates who felt that this was largely unnecessary due to the time constraints of the assessment.

2.4. Timing

Candidates fed back that the time provided to complete this assessment was sufficient to complete the questions, leaving little or no time to review and double check answers towards the end. Some candidates also stated that they failed to answer some questions due to the lengthy wording and the majority of questions being of a challenging level of difficulty. Respondents commented that they had "*...3 minutes per question; however this was not possible with most questions*". One hundred and four candidates felt that they were being tested on speed of calculation rather than mathematical ability, as in practice they would have made time to double, even triple check their answer. Two hundred candidates stated they had no time to review their answers.



Some students were surprised to find that paper 1 also consisted of SPCs and found that this took up a lot of time during each calculation.

Recommendation 3: The BPSA recommends that the GPhC ensures an adequate distribution of questions that require more than and less than the 3 minute average, to allow candidates sufficient time to complete all questions.

2.5. Submission of Answers

The BPSA are aware that the GPhC has produced guidance regarding the entry of answers onto the final answer sheet, however it is clear that there is still some confusion in certain areas. A common complaint amongst some candidates was the lack of clarity around filling in answers of a value less than one. Candidates were uncertain about whether to put a 0 before the decimal point when filling in values of this type. This meant that despite having the correct answer, candidates may have lost marks as a result of uncertainty around completion of a form.

Some candidates also addressed the wording of some questions in the paper, in regards to the final answer that was asked. Candidates were confused regarding the question asking for the answer to the 'nearest pence' and felt that there was a lack of clarity around this, giving candidates undue pressure and causing easy marks to be lost.

Recommendation 4: The BPSA advises the GPhC to provide further guidance on completing paper 1 answer sheets, ensuring candidates are aware of how to fill in each type of value. The paper instruction should contain sufficient instruction to allow questions to be answered in the correct form. Candidates should not lose marks through submission errors.



3. Paper 2

Five hundred and eighty-two candidates emailed the BPSA regarding paper 2 of the registration assessment. Of this, 574 candidates had little to no positive feedback regarding the assessment. The few candidates that did, stated that they enjoyed the variety of resources provided during the assessment and felt that the overall clinical relevance of the assessment was reflective of day to day practice.

3.1. Questions

3.1.1. Incomparable to Practice

Over 500 respondents stated that the registration assessment was not a true nor accurate reflection of real practice and many went on to say that the assessment was not reflective of the practice of newly qualified pharmacists. The majority of these complaints were followed by the unrealistic time constraints of the assessment, and so it can be assumed that this is one of the main reasons to its' incomparability to practice.

Commonly, respondents stated that they had asked registered pharmacists some of the same questions within the assessment, and *"even [they] could not answer them without looking it up"*. Furthermore, the majority of respondents felt that it was not appropriate, nor acceptable to perform a clinical check within 1.25 minutes, further reflecting the discord with real practice.

Recommendation 5: The GPhC should ensure that the assessment is an accurate reflection of day to day practice, especially for that of a newly qualified pharmacist.

3.1.2. Ambiguity

The ambiguity of many questions was a cause for concern amongst respondents. One hundred and forty seven candidates felt that a lot of questions were unclear in their wording and so could have been interpreted in different ways. This ambiguity meant that some questions could potentially have had more than one answer. Specific questions that were cited to support these claims included a question regarding counselling provided to a patient with oral thrush. It was thought that there were two potentially, equally viable answers in this scenario. Respondents felt that they needed more information to make a more informed and beneficial decision.

Some respondents also felt that even the shorter length questions were ambiguous and provided little information; a complete opposite to the EMQs towards the end of the assessment.

Recommendation 6: The GPhC should remove all questions which are unnecessarily ambiguous during the moderation of this assessment. In the future, the GPhC should work to avoid unnecessary ambiguity within questions and ensure there is sufficient information to inform a clear single best answer from the options provided.



3.1.3. Extended Matching Questions

From the two different types of questions within paper 2, the Extended Matching Questions (EMQs) were subject to many complaints. Respondents found that the length of these questions was unreasonably long, providing too much unnecessary information, with the question being unclear and hard to ascertain. It was stated by many candidates that the nature of these being at the end of the assessment left them pushed for time, and unable to make educated guesses due to the amount of information to analyse each scenario.

To many candidates concern, a large majority of the EMQs involved the use of SPCs and other resources, leaving them with even less time. Candidates had structured their time in accordance with the GPhC sample EMQs and other mock assessments, and felt betrayed at the fact that the EMQs within the actual assessment bore no resemblance to them. A large number of respondents cited questions 23, 24 and 25 from the GPhC sample paper released in November 2016. These questions were, in their opinion, more succinct, not as lengthy and considerably easier to interpret. Of the 10 sample EMQ's provided by the GPhC in the Pre-Registration Manual, only one of them required resources, of which this was a straight-forward flowchart of COPD therapy.

Recommendation 7: The GPhC should restrict the amount of EMQs that require resources to ensure candidates have sufficient time to complete each question.

Recommendation 8: The GPhC should restrict excessively worded EMQs or provide sample questions of similar length to appropriately prepare candidates for these types of questions.

3.1.4. Specific Questions

Collation of the feedback from 582 respondents identified common questions that were a cause of concern and distress for many. Approximately 320 complainants addressed the question regarding the CD register discrepancy, with the general feeling regarding this question being of disappointment and confusion. Respondents struggled to understand what skill this question was testing, and stated that in practice, they would spend more than 1.25 minutes identifying and resolving such a discrepancy. The question was described as unrealistic for the time pressure and without the use of a calculator. Hospital trainees stated that this was an unfair and irrelevant question, as this scenario was not one they had ever been exposed to during their training year.

Candidates also complained about the questions utilising the Clexane Summary of Product Characteristics (SPC). It was felt that the repeat use of this SPC for several questions was unnecessary and took up a considerable amount of valuable time towards the end of the assessment. Some respondents stated that they had no time to look through and find the information from the SPC and instead resulted in guessing the answers in order to complete the paper.

The question regarding the tonicity of glucose 5% solution also distressed many candidates who stated in their feedback, that they are still unable to find the answer to this within the BNF.



Candidates felt that this question was not a test of competency or clinical knowledge of a pharmacist, as in practice, this information could be established through use of other resources. Moreover, the question did not reflect the practice of a 'day 1 pharmacist' and the relevance of this question failed to be seen by many candidates.

3.2. Length

A majority of respondents (530) shared the view that the length of questions was considerably long, and "unnecessarily wordy". They explained that the amount of detail in each question meant that they spent the 1.25 minutes allocated per question merely reading and understanding what was being asked. This frustrated candidates as they felt the wording of questions had been deliberately written to confuse them. Candidates felt that realising how much time they spent reading the question during the assessment made them uneasy and therefore rush decisions, which they would not normally do in practice.

There was strong consensus amongst candidates that they understood the need for a pharmacist to be able to scrutinise and decipher necessary information from a scenario, however the vast amount of questions that were "*content and text heavy*" meant that the assessment overall was comprised of "*highly challenging to completely impractical questions*".

A number of respondents felt that the GPhC should carry out a word count, including the resource pack, prior to the assessment, and ensure uniformity in this respect, to previous registration assessments.

Recommendation 9: The GPhC should conduct a word count of the entire assessment prior to the assessment date, and ensure that there is similarity in the length of the papers to previous years. We encourage the GPhC to publish a word-count comparison of this paper to the June and September 2015 and 2016 papers.

3.3. Resources

The resource pack provided during this part of the assessment attracted significant feedback. Five hundred and forty-one respondents felt that the size of the resource pack was too large, and overall the assessment contained too many questions requiring the use of a resource, specifically the Summary of Product Characteristics (SPCs).

Candidates were aware that the assessment would involve the use of SPCs, but were thrown by the number of questions they were answering from an SPC. Many respondents stated that this resource was largely incomparable to real life practice, as the use of technology would render "*flicking through pages and pages of an SPC completely useless*" and in practice the information could be found much more efficiently through the use of technology.

Recommendation 10: The GPhC should have a limit on the number of SPC related questions and ensure the number remain comparable to previous sittings of the assessment. The BPSA would urge the GPhC to publish this information, with a breakdown of resource-linked questions per paper, and per section of paper 2 (SAQ and EMQ).



3.4. Timing

The issue of timing was one that was raised by nearly all respondents, with 569 emails addressing this concern. A common phrase reiterated amongst emails was that the registration assessment *“felt like a test of speed, rather than a test of clinical knowledge and competency of a Pharmacist”*.

Four hundred and fifty three respondents stated they were incredibly pushed for time, and so were unable to complete the assessment in a safe and practical manner. Candidates guessed answers towards the end of the assessment, without reading the question or the resource provided. The GPhC should not take the number of candidates that submitted all answers as a measure of appropriate timing, as it is clear that many candidates merely filled in a box with the hope of guessing an answer, rather than having made an appropriate and informed choice. Two hundred and eighty-two respondents stated that they had never previously ran out of time during mock assessments or university exams, but were pushed for time when completing this assessment.

Respondents felt that the unreasonable time pressure within the assessment meant that they were unable to make safe and informed decisions, which they would normally make time for in practice. It was recognised that in practice, no pharmacist would make a decision on the basis of guesswork despite any sort of time pressures and so this contributed to the assessment being at discord with practice.

Some candidates went as far as to state that the registration assessment almost *“promotes bad practice”* with the unreasonable and unrealistic time frames that were set for each question. It was suggested that the time frame for paper 2 of the assessment should be increased to allow for the lengthier and more complex questions, or the number of questions should be reduced.

Recommendation 11: The GPhC should carry out representative assessments using the full question paper with practising pharmacists, to ascertain the time frame required for questions to be completed in a safe and efficient manner.

3.5. The Registration Assessment Framework

An overwhelming majority of respondents had strong views regarding the relevance of the Registration Assessment Framework (RAF) to the actual assessment. Candidates formed the basis of their revision using the RAF and so felt perturbed that the actual assessment was not consistent with the framework; *“... given that my revision focused on the framework and took into account the information provided via the GPhC videos and website, I could never have been prepared for that paper”*.

Four hundred and ninety respondents felt that, although a ‘medium’ weighted topic, Respiratory was over represented in regards to this weighting, whilst ‘high’ weighted topics had less questions. Respondents stated that there were a lack of Cardiovascular disease and Central Nervous System related questions, and these topics were the focus of the majority of their revision. There was also a number of comments regarding the amount of oncology related



questions within this assessment. Trainees felt that, as this topic is not common practice and an unlikely medicine newly qualified pharmacists would be involved with, the amount of questions on cancer medicines was unexpected and alarming.

Two hundred and fifty four respondents felt that the assessment was not accommodating of the different training environments. Whilst a large majority of respondents agreed that the assessment was very clinical and hospital focused, they felt there was a lack of over the counter and law questions within the assessment.

Recommendation 12: The GPhC should ensure that the RAF is not misrepresentative nor misleading and provides trainees with sufficient information in order to structure their learning and revision accordingly. The GPhC should provide information on questions across the two papers which are mapped onto the RAF against the categories of HIGH, MEDIUM and LOW weighting.

Recommendation 13: The GPhC should ensure that the registration assessment is reflective of their RAF.

3.6. The GPhC Sample Questions

Five hundred and sixteen respondents expressed their concerns and frustration at the disparity between the GPhC sample questions and the actual assessment. *“The GPhC sample paper was incomparable in every form, (content, word count, complexity), to the real paper”*. It was stated that candidates had passed and answered the sample questions with relative ease in comparison to the actual assessment, and felt misled by the sample questions provided by their regulatory body.

Recommendation 14: The GPhC should publish sample questions of representative difficulty, complexity and length to the registration assessment, and choose these questions from the same pool that the registration assessment questions are chosen from.

3.7. Mock Assessment Training Providers

The BPSA recognises that the GPhC is not involved in regulating organisations that provide mock assessments, however the considerable amount of feedback received from respondents regarding these mock assessments, has meant that this complaint cannot be ignored.

Four hundred and five respondents fed back their concerns regarding the mock questions provided by various organisations. Respondents felt that mock assessments were recommended and advertised as being of the same difficulty, if not more so, as the actual assessment, and turned out to be the complete opposite. Four hundred respondents showed concern that *“if certain organisations failed to understand the Framework provided by the GPhC to produce a comparable assessment, how are students expected to comprehend [it]”*. Respondents had paid considerable amounts of money for some assessment and felt angered and disappointed at the cost of such incomparable assessments.



Recommendation 15: The GPhC should ensure that pre-registration trainees are aware that no mock assessments or courses are endorsed by the GPhC and may not provide an accurate insight into the actual GPhC Registration Assessment.

3.8. Calculations

The calculations questions in paper 2 of the assessment have resulted in many complaints from candidates. Although calculations were anticipated in this paper, 500 respondents felt that there were too many calculations, having already completed a calculations paper that morning. Three hundred and twenty-five respondents also felt that the calculations were incredibly time-consuming, with some spending more than 5 minutes on a question, stating that in practice they would have used a calculator. There was strong consensus that these calculations were not of "*basic number sense*", which candidates were expecting, and required a lot more working than they had anticipated for this assessment.

Recommendation 16: The GPhC should have a limit to the number of calculation questions within paper 2 of the assessment. The GPhC should publish a comparison of the proportion of calculation questions in paper 2 from this, and both previous sittings of this format of Registration Assessment (June and September 2016).

Recommendation 17: The GPhC should ensure that the calculations within paper 2 of the assessment test number sense and are answerable within the average time limit for each question in this paper.



4. Training Providers

Although beyond the scope of this document, a vast majority of candidates commented upon their training throughout the year, making it noteworthy for this report. A significant number of candidates complained that although the registration assessment had been changed and modified in order to reflect and better portray real practice, it was frustrating to see that the training year had largely remained unchanged. Candidates were extremely dissatisfied with the lack of regulation of training providers and pre-registration tutors, stating that *“there is no way that this training year could have prepared me for the exam I sat”*. It was commented upon that some training providers had also misled them in their revision and learning, providing ‘easy’ mock questions.

Another common theme was the lack of study time provided to pre-registration trainees throughout the year. Some candidates within the community sector felt that they had been used as *“cheap labour”* with no consideration for their learning needs.

The BPSA recognises that there is large disparity between different training providers, training sectors and pre-registration tutors. Candidates, although sitting the same assessment are taught and learn in different ways, depending on their pre-registration tutor and even training sector. The BPSA agrees with and advocates the regulation of training providers and pre-registration tutors, in order to ensure a more uniform and comfortable learning environment for all trainees.

Recommendation 18: The BPSA recommends that the GPhC addresses the issues surrounding the pre-registration training year, in terms of the disparity of study time amongst training providers, the lack of regulation of pre-registration tutors, and looks into reviewing the training year in order to better prepare all candidates for registration and future practice.

5. Results

Similarly, it has come to the attention of the BPSA that there is a great deal of confusion amongst trainees with regards to the marking of the registration assessment. Trainees are still largely unaware of how their overall marks are awarded. Whilst the GPhC has published guidance following the September 2016 results, this is not easily accessible via the GPhC website, resulting in some candidates and training providers being unaware of its existence.

Recommendation 19: The BPSA welcomes further information and clarification for candidates regarding the moderation and pass mark derivation for the registration assessment. The GPhC should place this guidance within the pre-registration manual and an easily accessible area of their website.



British Pharmaceutical Students' Association
The Official Student Organisation of the Royal Pharmaceutical Society

Authorship

This document was written by Beenish Zafar Chaudhry, pre-registration pharmacist and BPSA Graduate Officer 2017-2018. It has been endorsed and accepted by the BPSA Executive of 2017-2018.

About the BPSA

“To engage with and advocate for every member, to empower them in their learning and development and to inspire the pharmacists of tomorrow”

Founded in 1942, the British Pharmaceutical Students' Association is in its 74th year and is the only organisation that solely represents pharmacy students and pre-registration pharmacists across Britain. As the official student organisation of the Royal Pharmaceutical Society, the BPSA aims to promote the interests and welfare of pharmacy students and pre- registration pharmacists. The BPSA regularly represents students' views in the wider pharmacy media, in consultation responses and in meetings with individual stakeholder organisations. As well as represent pharmacy students, we aim to educate, support, and entertain our members. We organise a comprehensive range of events and services throughout the year, so there is something for everyone to get involved in. We have an Executive which coordinate the running of all our events and services and they are supported by a network of BPSA National Representatives which are in every school of pharmacy.

Media Enquiries

Media enquiries can be made to the following members of the BPSA Executive:

Stephen Messham
BPSA President 2017-2018
president@bpsa.co.uk

Jessica Bland
BPSA Public Relations Officer 2017-2018
pro@bpsa.co.uk