

British Pharmaceutical Students' Association

Aspirations and Expectations of Pharmacy Students

A View to the Future

April 2017

www.bpsa.co.uk



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



Foreword

The British Pharmaceutical Students' Association (BPSA) is the official representative body of pharmacy students and pre-registration trainees in Great Britain. Established in 1942, the Association aims to promote the interests of pharmacy students.

As part of its representative role, the BPSA has sought to identify the aspirations and expectations of current pharmacy students for their future profession. As Secretary General, I set myself the aim of designing a survey to gather pertinent and useful information on a number of topics. The survey ran for eight weeks from 11th September to 5th November 2016, with promotion in each school of pharmacy in Great Britain and during the autumn round of BPSA Area Conferences. During this time, we received 1374 responses. These have provided a number of insights, discussed in this paper. The recommendations made have been accepted by the delegation of our 75th Annual Conference.

Of those who responded to the survey, the vast majority (1027, 74.7%) identified themselves as 1st year students. Another 96 (7.0%) stated that they are in their 2nd year, 103 (7.5%) are 3rd year students, and 148 (10.8%) indicated that they are in their final year of study. As such, the responses to the survey largely reflect the viewpoint of students who are new to the world of pharmacy.

The BPSA enjoys strong working relationships with many stakeholders, including the Royal Pharmaceutical Society (RPS), the General Pharmaceutical Council (GPhC), and Health Education England (HEE). Our Executive will endeavour to represent the views expressed by our members through the survey and this paper. We hope to contribute to our profession and help shape education, training and practice.

I hope that the profession as a whole will find the largely positive and optimistic views expressed by students to be heartening. The importance of these opinions cannot be overemphasized. Students, pre-registration trainees and newly qualified pharmacists must be included in decision-making when setting the course for the future. They represent the future of the profession.

Thomas Byrne
Master of Pharmacy Student
Secretary General 2016-2018
secgen@bpsa.co.uk



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Summary of Key Points

1. Students, pre-registration trainees and newly qualified pharmacists must be included in decision-making when setting the course for the future.
2. International students must be made aware of UK visa regulations relating to pre-registration training at the earliest opportunity, prior to choosing to study in the UK.
3. Students recognise pharmacy as a healthcare degree and profession, but with a proud basis in guiding scientific principles.
4. We expect exposure to clinical environments from the outset of the MPharm programme
5. Hands-on opportunities must be provided to develop clinical, commercial, leadership, research and general management competencies.
6. Delivering university placements during vacation time could be feasible and acceptable to students.
7. Interprofessional learning opportunities must be developed which foster effective multidisciplinary relationships at an early stage and prepare students for practice.
8. We expect formal prescribing training to form part of the initial education and training of pharmacists.
9. Greater efforts must be made to link the number of pharmacy students to workforce requirements.
10. Models of pre-registration training must be developed which provide multi-sectoral experience to effectively prepare students for professional practice.
11. The structured development of young pharmacists must be continued beyond pre-registration education and training.
12. Professional self-confidence must be instilled in students and strengthened as they progress into practice.
13. Employers must actively support their pharmacists to explore aspects of practice that appeal to them, improve patient care, and provide career satisfaction.
14. Pharmaceutical expertise must be available twenty-four hours a day, seven days a week, in all care settings.
15. Training opportunities must be provided to expand the prescribing capabilities of the pharmacist workforce.
16. Pharmacist prescribing must become routine practice, with prescribing credentials conferred to all pharmacists as a matter of course.
17. We expect pharmacy teams to be present within all accident and emergency departments.

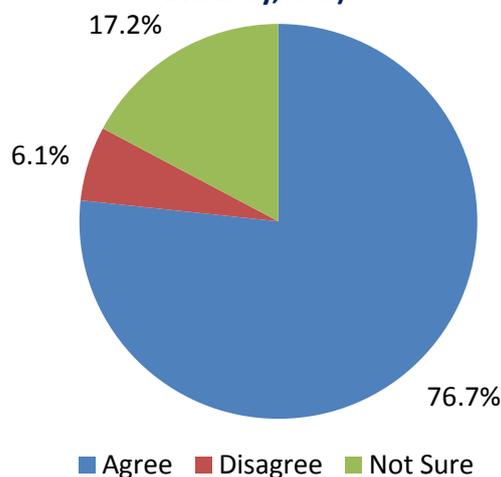


Areas of Training and Practice

At a time when barriers between different sectors are breaking down, it seems students are also looking to dismiss a 'silo' mentality and gain a broad experience during their pre-registration training. Over three quarters (76.7%) of respondents expressed an interest in working in more than one area of practice during their pre-registration year, with a further 17.2% of respondents undecided on this matter. Only 6.1% dismissed the possibility. Multi-sectoral training could help prepare students for 'portfolio' careers.

Based on clear demand, the BPSA recommends that pre-registration training should incorporate multi-sectoral experience, and we will advocate for new models of training being explored and expanded. Examples include places offered between Leeds Teaching Hospitals and [the city's clinical commissioning groups](#), and the [three-way combination in North Wales](#) with trainees spending two days each week in hospital and community, with Wednesdays in primary care. The BPSA are aware of plans in Scotland to trial modular programmes, with trainees spending time in three environments. National postgraduate organisations should work to facilitate co-operation between sectors to develop and extend these modular offerings.

I would like to complete my pre-registration training in more than one area of practice (e.g. hospital and community, community and industry, etc.)



BPSA Policy

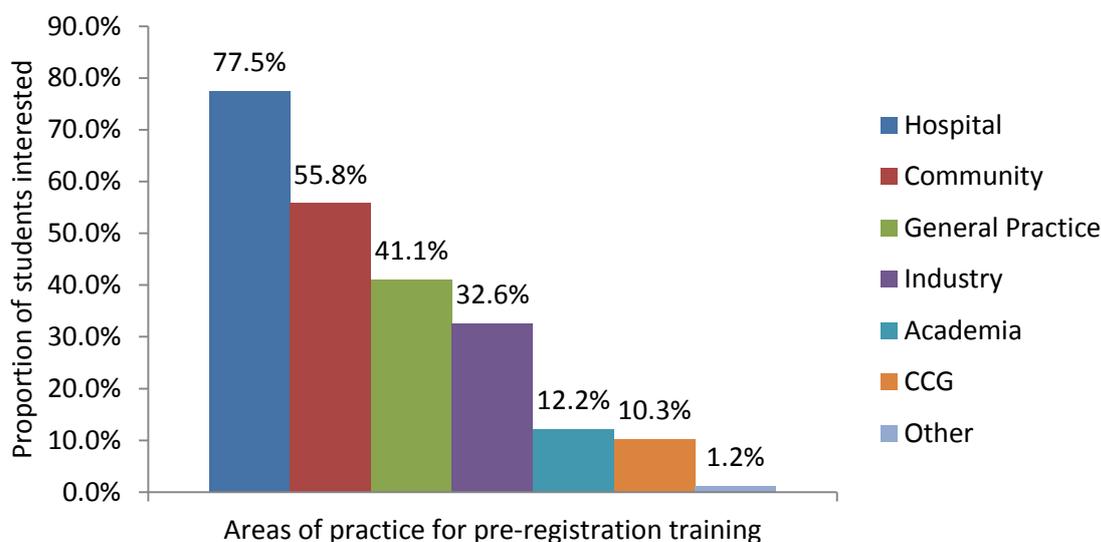
"The pre-registration placement should have the option to be more rounded, i.e. split pre-registration placement rather than picking the one sector" (2014)

Looking to the future, the BPSA believe that the MPharm degree and pre-registration training should prepare trainees for multi-sector work and avoid making clear-cut distinctions between community pharmacy, acute care and primary care. The MPharm equips all graduates with broad knowledge and skills, but pre-registration training often funnels graduates into more limited roles. A newly qualified pharmacist should join the register with the ability to work wherever medicines expertise is required. Multi-sector pre-registration places would offer trainees a broad experience, developing their knowledge and skills in preparation for a career working across care pathways. This training would better reflect the variety of roles now available to pharmacists on registration.



There is a [requirement from the General Pharmaceutical Council](#) that at least 26 weeks of pre-registration training must be spent in 'patient-facing' sectors. Multi-sector positions offer an exciting opportunity for trainees. Students have shown an interest in working in industry, academia, primary care, and other settings. More work should be done to increase access to these opportunities. Spending several weeks or months in an area of practice will provide students reasonable depth to make an informed decision on which aspects of practice to enter once registered.

I would like to complete my pre-registration training year in the following area(s) of practice



The BPSA were interested to find a substantial majority of students (77.5%) would like to undertake training in hospital. There has been a steady growth in the number of available training places in the hospital sector over the last few years, with the [most recently available data](#) showing 689 places advertised for 2016 compared to 642 in 2013. However this would not cater for the demand suggested by these survey responses. For the 2016 intake, there were a total of 1514 applicants competing for 689 advertised posts. Our survey results suggest a higher number of students are interested in spending some or all of their training year in a hospital setting, but some may be discouraged from seeking these opportunities due to the perceived (and actual) competition. Students have previously highlighted during debates at our Annual Conference that competition for hospital pre-registration positions means they sometimes accept a position in the community sector, which was not their preference.

It is interesting to note that 32.6% of respondents are interested in undertaking pre-registration training in the pharmaceutical industry. There are currently very few places available, and competition is fierce (447 students express interest here, compared to 15 available places). The BPSA would like to see an increase in the number of pre-registration training places offering an industry component, as this has been Association policy since 2014. Even short placements would provide a valuable experience to students interested in that area of practice. This would be a valuable application of the clinical and scientific



BPSA Policy

“The Executive of the BPSA should liaise with ABPI, Academy of Pharmaceutical Sciences and individual pharmaceutical companies to try and increase the number of industrial placements available across the UK”
(2014)

knowledge taught in the MPharm degree. The BPSA Executive will seek to liaise with the Association of the British Pharmaceutical Industry, Academy of Pharmaceutical Sciences and individual pharmaceutical companies to try to increase the number of industrial placements available across the UK. We would also like to highlight that some graduates who undertake hospital or community pre-registration training later go onto industry graduate schemes or direct entry jobs. This is despite a relative lack of career information reaching students. The pharmaceutical industry should attend careers events in Schools of pharmacy to communicate information on these opportunities. The industry has a unique opportunity to harness this interest from pharmacy students, providing them with quality and passionate early talent.

The BPSA supports the [RPS campaign](#) calling for the pharmacy profession to work more closely with GP colleagues in primary care, which has led to [2000 new roles in two years](#). It is interesting to note many students are interested in CCG and GP placements. These training places have only come to the fore in more recent years, and [Health Education England have prioritised investment](#) in pharmacy training to meet the increased demand for pharmacists in primary care roles. There seems to be significant interest in these opportunities among current students. The BPSA supports the placement of pharmacists into primary care roles and greater integration into the multidisciplinary primary care team. Such placements could also help to foster better links between practices and community pharmacies.

BPSA Policy

“The BPSA should promote the recent RPS campaign calling for the pharmacy profession to work more closely with GP colleagues in primary care”
(2015)

55.8% of respondents express interest in community pharmacy pre-registration training. The community sector remains the public face of the profession, and will likely continue to provide a substantial proportion of training places. However, the BPSA would like to see community pharmacy better integrated into primary care teams and other local health and social care services.

A number of students expressed interest in spending part of their pre-registration training in academia. [Sunderland School of Pharmacy provide academia/community positions](#), and this model of training could be rolled out at other universities. Such a role could appeal to those with a supportive nature who are interested in professional development, developing skills and knowledge which could later be called upon as a pre-registration tutor or teacher-practitioner. Training positions which are split between academia and another sector could provide a taster of a [rewarding career](#) educating future cohorts of students and pursuing research interests.



Models of pre-registration training must be developed which provide multi-sectoral experience to effectively prepare students for professional practice

In light of these findings, the BPSA intend to discuss the provision of pre-registration training with relevant stakeholders. Multi-sector pre-registration training places are clearly attractive to students, and the BPSA would welcome more opportunities being created to meet this demand. We would like to see an increase in the diversity of training places available, and will push for the creation of opportunities in the industrial sector to fulfil the demand from current pharmacy students. The BPSA will also aim to raise the profile of combined pre-registration places which incorporate training in general practice, CCGs and academia. The BPSA organise their Area Conferences and other service offerings such as the Science into Practice conference to incorporate hospital, community and industrial themes to give students a wider exposure to different elements of pharmacy practice. The BPSA are in a prime position to continue the discussions with appropriate stakeholders regarding increasing the opportunities for pre-registration pharmacists as well as the number of multi-sector pre-registration placements.

Future pharmacy professionals seem geared towards patient-facing clinical practice. It is clear that current prospective pharmacists see the clinical aspects of their future role as being crucial, but also recognise other aspects of practice will play a part in their career. Pharmacists often have an entrepreneurial spirit, reflected by the 37.1% of students who are interested in the commercial aspects of their future career. It might be somewhat surprising that only 35.4% of students are interested in general management. Pharmacists are the leaders of their teams in community pharmacies, and often rise to positions with a managerial component in other sectors. A significant proportion of respondents are interested in research, and some of these will enter the community sector. As the largest sector, and with the greatest accessibility to patients and the public, the BPSA feels that there are rich opportunities for community pharmacy to become involved in research.

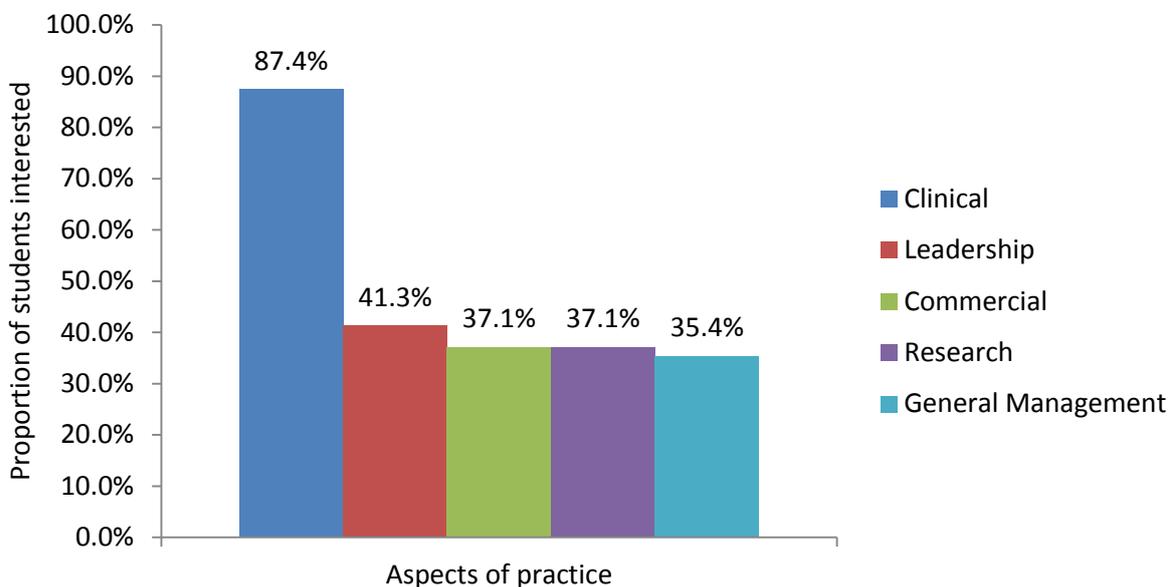
At our Annual Conference in 2015, delegates identified leadership, assertiveness and conflict management skills were not covered in as much depth during undergraduate training as they would like. We are keen to see progress made in this area, to best prepare students for the challenges they will face during their pharmacy careers.

BPSA Policy

“There should be training in leadership, assertiveness and conflict management incorporated into the MPharm undergraduate degree”
(2015)



I am interested in the following aspects of practice when I register as a pharmacist



It is worth noting that these aspects of practice are not mutually exclusive, and that most jobs will incorporate a mix of these. A career in pharmacy can certainly encompass all of the above. What is clear is that most students are eager to apply their clinical skills taught at university and developed in practice.

The BPSA recommend that universities prepare their students for practice by developing them in a broad range of competencies. The MPharm programme often succeeds at teaching theoretical content in a classroom environment, but we believe it could provide more situations where skills can be developed through hands-on experience. We also recommend that employers actively support their pre-registration trainees and pharmacists in exploring aspects of practice which appeal to them and provide career satisfaction. This, in turn, will lead to improvements in patient care through innovation and optimal utilisation of pharmacists' potential.

Hands-on opportunities must be provided to develop clinical, commercial, leadership, research and general management competencies

We feel that employers may sometimes fail to fully recognise and utilise the skills which newly qualified pharmacists possess. These could be better harnessed to improve the care and service offered by their organisation. This needs to be a joint effort between pharmacists and employers, as pharmacists have a responsibility to seek out opportunities to put their capabilities to good use and further develop. Development must recognise

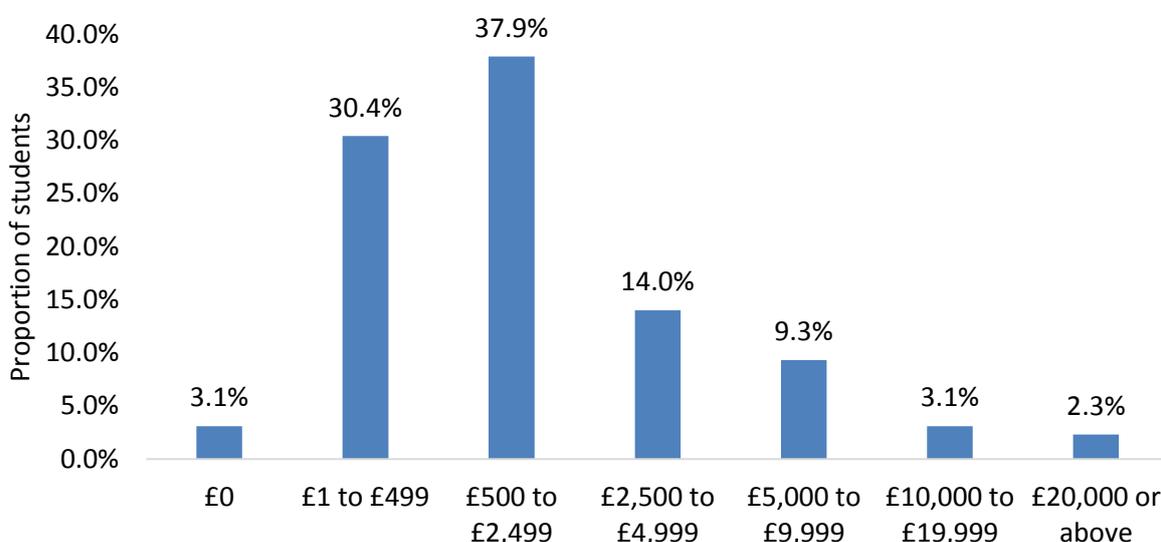


advancing practice while sustaining a holistic approach to pharmacy practice. The right training opportunities need to be made available across the profession.

Employers must actively support their pharmacists to explore aspects of practice that appeal to them, improve patient care, and provide career satisfaction

Personal development is crucial as a pharmacist. Courses, conferences and membership fees support this. Both employers and employees make a contribution towards this. A small number of respondents indicated they aren't prepared to pay anything towards their own development in their first 5 years as a qualified pharmacist, with around a third of pharmacy students unwilling to invest £500 or more (equivalent to £100 per year). Assuming that membership fees for the Royal Pharmaceutical Society amount to around £950 in the first 5 years of registration, it appears a large proportion of respondents would not make this investment.

How much would you be willing to individually contribute for your own personal development, including courses, conferences, qualifications etc. during your first 5 years as a registered pharmacist?



Most respondents to our survey were newly enrolled on the MPharm, and as such might not be aware of the continuing professional development expected of pharmacists. This might influence responses. Students may have enrolled on the pharmacy degree unaware of the potential cost implications which membership of a profession entails. There is an opportunity for the BPSA to work with students throughout their degree to increase their awareness of this. The BPSA believe that pharmacists have a responsibility for continually developing themselves after registration and should be prepared to make some investment in this.



It may be interesting to compare the figures mooted in this survey to the significant costs incurred by junior doctors. A 2011 analysis by the [British Medical Association](#) (BMA) showed that junior doctors spend an average of £17,114 on postgraduate training from Foundation Year 1 to Certificates of Completion of Training (CCT). The BPSA does not seek to make a recommendation on how much young professionals ought to spend on their development, but we do believe young pharmacists should be motivated to continue their development beyond pre-registration education and training, and this inevitably comes at a cost. Early career pharmacists generally do not face the same economic burden as early career doctors.

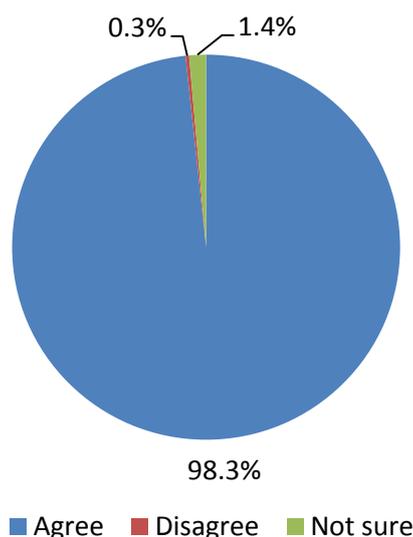
The structured development of young pharmacists must be continued beyond pre-registration education and training



The Place of Pharmacists in Healthcare Teams

Students feel that pharmacists are firmly embedded in the multidisciplinary team. According to 98.3% of survey respondents, pharmacists are viewed as part of a multidisciplinary healthcare team alongside doctors, nurses and allied health professionals. It is worth noting that as many respondents were newly enrolled on the MPharm course and therefore have little context, this view might also reflect the perceptions of the general public. Almost all respondents recognise the positions of pharmacists within a healthcare setting. It would be interesting to compare this with medical and nursing students, to see whether they share this view. The BPSA will seek to promote pharmacy's status to other healthcare professionals in training. We may achieve this by working closely with the BMA Medical Students' Committee and equivalent organisations for other healthcare professions to organise interprofessional learning activities. Students recognise that their future career entails working alongside other healthcare professionals. The BPSA recommends that schools of pharmacy seek to provide interprofessional learning opportunities to prepare students for this and to foster positive multidisciplinary links at an early stage.

I view pharmacists as being part of a multidisciplinary healthcare team, alongside doctors, nurses and allied health professionals



BPSA Policy

“BPSA should work closely with BMA Medical Students' Committee and equivalent organisations for other healthcare professions to organise interprofessional learning activities”
(2014)

Interprofessional learning opportunities must be developed which foster effective multidisciplinary relationships at an early stage and prepare students for practice

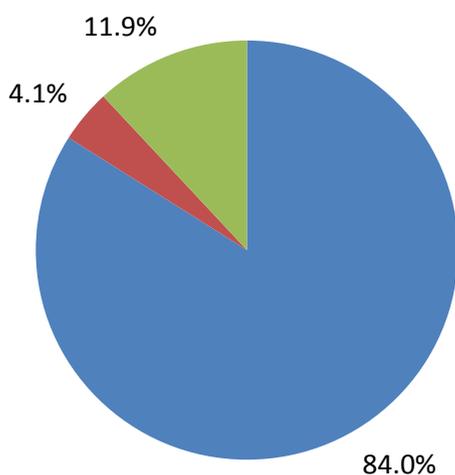
Provision of seven days services is a major priority in the National Health Service. The BPSA supports the recommendations made in the '[Transformation of seven day clinical pharmacy services in acute hospitals](#)' report. We believe that pharmaceutical care services should be available twenty-four hours a day, seven days a week, in both primary and secondary care.



It would appear that pharmacy students are in support of this concept, and that they are willing to support provision of seven day clinical pharmacy services through rota work. Some of those who disagreed may alternatively see themselves working set, more sociable, hours in a community pharmacy or some other context.

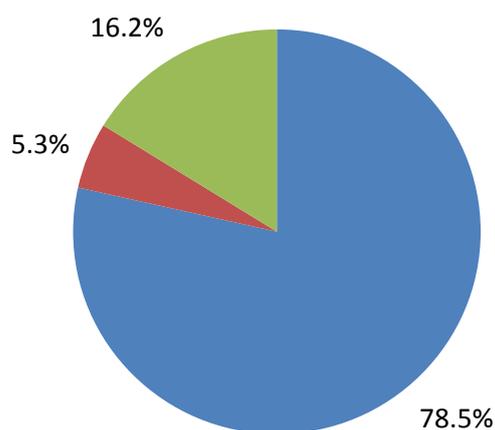
84% of students agreed that clinical pharmacy services should be available seven days a week, but only 78.5% of respondents indicated that they would be willing to be part of the rotas to support provision of such services. This demonstrates that a high proportion of students agree that services should be available to patients seven days a week, while recognising that fewer students are willing to participate in rota work.

I believe that clinical pharmacy services should be available to patients seven days a week



■ Agree ■ Disagree ■ Not sure

I would be willing to be part of rotas, such as colleagues in medical and nursing professions are, to support care seven days a week



■ Agree ■ Disagree ■ Not sure

BPSA Policy

“Pharmaceutical care services should be available twenty-four hours a day, seven days a week, in both primary and secondary care”
(2015)

For provision of seven day clinical pharmacy services in acute hospitals to be a success, a cultural shift in the pharmacy workforce is required. These responses reflect such a shift in attitude. The benefits to the profession of adopting this more flexible approach to working include increased recognition as part of the clinical workforce, both from other healthcare professionals and from patients and the public. On the whole, current pharmacy students seem willing to support this. The BPSA respects that rota work is incompatible with some people’s lifestyles, but are pleased to see a majority of students are prepared to contribute to delivering seven day services. Shift work could be considered an expectation

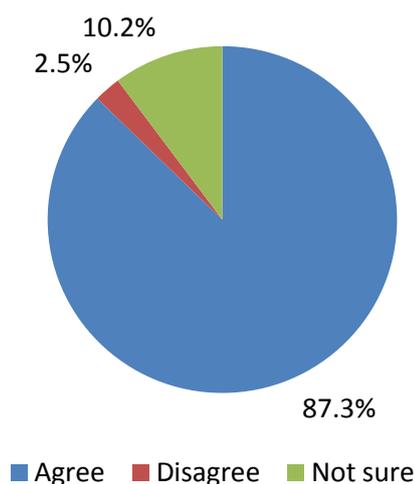


of modern practice, and this might be a factor in choosing which area of pharmacy practice to work in. Though hospitals could be considered twenty-four hour care environments, it's worth noting that community pharmacies already offer their services on evenings, weekends, and public holidays. This is one of the many ways in which the sector provides benefit to millions of patients on a daily basis.

Pharmaceutical expertise must be available twenty-four hours a day, seven days a week, in all care settings

There are many exciting developments in the pharmacy profession at present, with pharmaceutical expertise being made more widely available wherever medicines are used. One such example is in accident and emergency departments. Emerging evidence shows that [pharmacists in emergency departments](#) are able to help a large proportion of patients, particularly after advanced clinical practice training. Such work is being piloted in some areas already, where feedback has been good and waiting times reduced. The BPSA encourages the development of the profession and bridging the gap between primary and secondary care. Many presentations at A&E departments are for minor ailments a pharmacist is readily able to help with. A pharmacist carrying out drug histories for emergency admissions is hugely beneficial to fast-track treatment.

I believe that pharmacy teams should be present within accident and emergency departments



BPSA Policy

“The BPSA should support the placement of pharmacy teams within accident and emergency departments”
(2015)

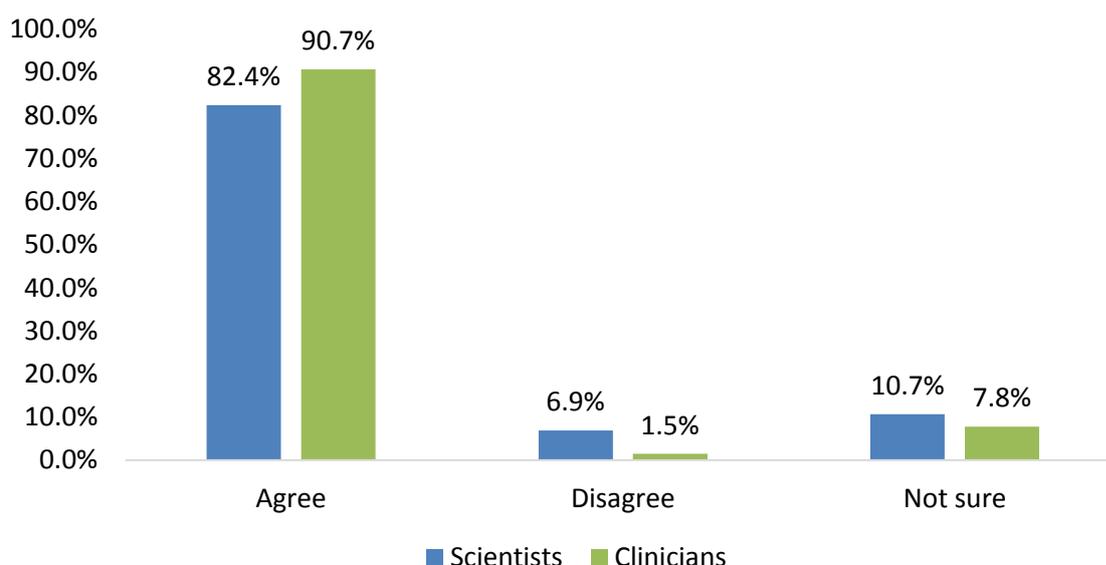
Pharmacists based in A&E departments might be able to triage patients, treat minor ailments, and provide care in cases where a pharmacist's expertise would be the most appropriate given the patient's circumstances. Students' views on this mirror the current developments in this area of practice. The BPSA will continue to support students' understanding and awareness of developments within the pharmacy profession, help prepare them for starting work as a qualified pharmacist, and highlight the multitude of opportunities open to modern pharmacists.



We expect pharmacy teams to be present within all accident and emergency departments

Over the course of years and decades, the focus of pharmacy education and practice has shifted away from the scientific and towards the clinical. It seems most students view pharmacists as both scientists and clinicians. Students recognise pharmacy as a healthcare degree and profession, but with a proud basis in guiding scientific principles. Given most responses came from first year students at the point of entry to the degree, this might reflect the view of the general public too. Public awareness of the role of the pharmacist is important, as it might guide students' choice when deciding to study pharmacy and enter the profession.

I view pharmacists as ...



Pharmacy's patient-facing focus and impact of medicines expertise on care is obvious to students. However, given the emphasis the General Pharmaceutical Council put on integrating science into the [accredited pharmacy degree](#), science retains clear importance in relation to pharmacy practice. Equipping students with scientific knowledge allows them to work from first principles. To highlight the importance of this duality of professional characteristics, the BPSA host an annual 'Science into Practice' conference. We celebrate our scientific training while focusing on readying students for clinical practice.

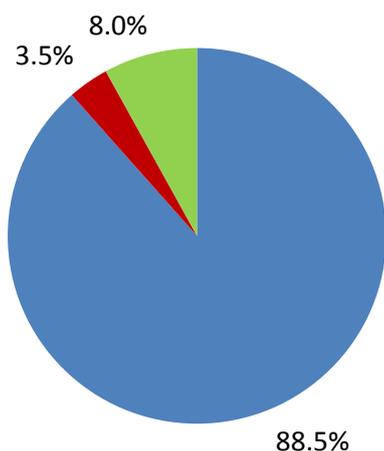
Students recognise pharmacy as a healthcare degree and profession, but with a proud basis in guiding scientific principles



Pharmacist Prescribing

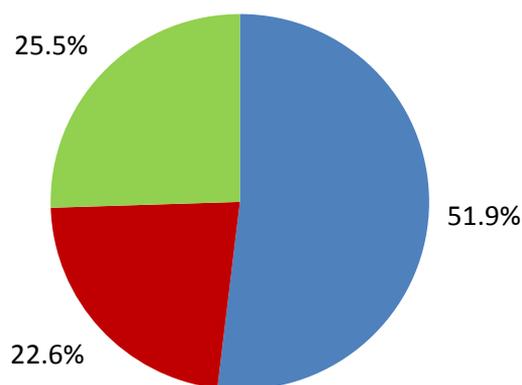
Pharmacist prescribing is a core element of the BPSA's vision of the future, as it is already well-established as providing real benefit to patient care and the NHS. The benefits of pharmacist independent prescribers have been clearly demonstrated in evaluations over the last several years. Pharmacist prescribers offer clear benefits [in the hospital setting](#), with growing evidence of clinical efficiency and patient safety. Utilising the pharmaceutical expertise of pharmacists optimises skill mix, and prescribers can facilitate care in an efficient manner, particularly out-of-hours when senior clinical decision makers may not be as readily available. This can improve patient flow through hospitals and reduce hospital stays and discharge times in line with the aims of Sustainability and Transformation Plans (STPs).

I think that the MPharm degree should teach students how to prescribe medicines



■ Agree ■ Disagree ■ Not sure

I think that newly qualified pharmacists should be able to prescribe medicines



■ Agree ■ Disagree ■ Not sure

The role of the pharmacist is constantly evolving and progressing, with independent prescribing becoming more and more commonplace since its introduction a decade ago. This expansion of professional skillset is currently being achieved through post-graduate training, but the BPSA would like to see prescribing fall within the remit of initial education and training of pharmacists. The MPharm degree already equips students with an extensive knowledge and appreciation of drug use, toxicity, monitoring and evidence-based practice. Background knowledge of prescribing matures pharmacy students' ability to critically evaluate the prescribing of others, and will prepare them to one day prescribe themselves. Having prescribing taught during the MPharm would equip graduates with additional knowledge and skills and prepare them for further study leading to a prescribing qualification. Students wouldn't necessarily graduate as

BPSA Policy

"An aspect of pharmacist prescribing should be incorporated into the undergraduate MPharm degree course" (2014)

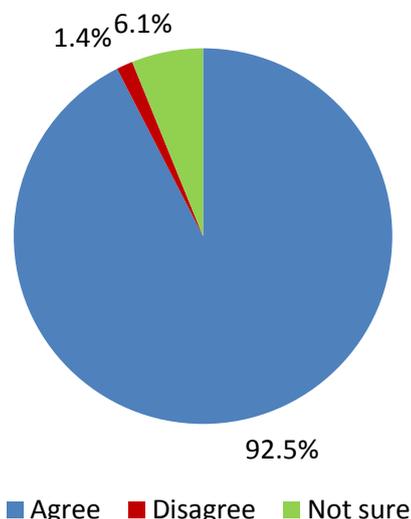


prescribers, but could move into a period of supervised practice. Once signed off as competent by a more senior pharmacist tutor, recently qualified pharmacists could be conferred full prescribing rights.

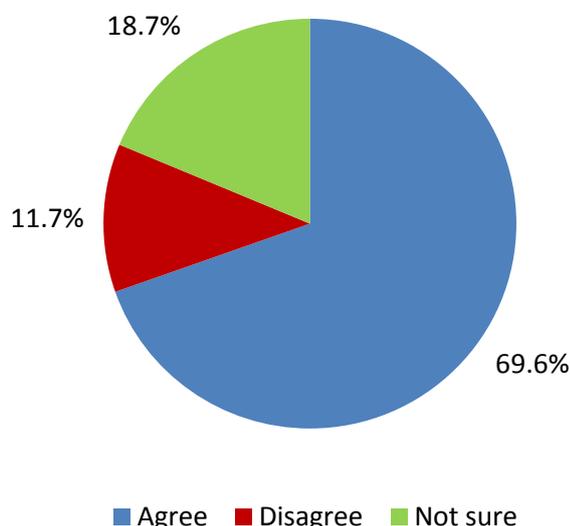
We expect formal prescribing training to form part of the initial education and training of pharmacists

Only 51.9% of respondents to the survey believe that newly qualified pharmacists should be able to prescribe medicines. There are many considerations to this proposal. As it stands, full prescribing training would be difficult to incorporate into the initial education and training of pharmacists. The practice-based elements of the training might be deliverable through a five year integrated degree programme, but for now it would be beyond the scope of the current model. The current prescribing qualification for qualified pharmacists is heavily practice based, which may impede integration into the MPharm degree. The BPSA will continue discussions with the relevant stakeholders to explore how prescribing training could be offered at undergraduate level.

I would like to be able to prescribe medicines during my career as a pharmacist



I would be willing to pay a fee to obtain a prescribing qualification



92.5% of respondents expressed an interest in prescribing medicines during their career as a pharmacist, showing the vast majority of future pharmacists see this as part of their prospective role in healthcare. This could be considered to be in line with the current developments in the pharmacist's role in sectors such as hospital pharmacy or general practice. The BPSA would like to see more prescribers in the community, and increased utilisation of prescribing through the community pharmacy network. There is a vast unmet potential which, if prudently addressed, could relieve pressures facing wider primary care.



The BPSA were interested to find a large proportion of students willing to fund their own prescribing qualification. However it should be noted that in our survey, we gave no indication of the costs of this training. This would doubtless influence responses, and students may have underestimated or overestimated the cost. Nonetheless we think that the responses to this question illustrate the enthusiasm students have for this advanced training. The BPSA believe it is crucial that employers and NHS hospital trusts support the development of the skills and capabilities of their pharmacist workforce from an early stage and onto advanced practice.

Training opportunities must be provided to expand the prescribing capabilities of the pharmacist workforce

Based on the responses to questions relating to pharmacist prescribing, the BPSA recommend that steps are taken to introduce formal prescribing teaching as part of the MPharm degree. This need not necessarily lead to automatic graduation as a prescriber, but could form a more robust basis for postgraduate training and practical experience. Eventually the BPSA expect prescribing to become routine practice, and for prescribing credentials to be conferred to all pharmacists as a matter of course.

Pharmacist prescribing must become routine practice, with prescribing credentials conferred to all pharmacists as a matter of course

The responses to many questions in this section, and throughout the survey, have highlighted that students are keen to build and utilise their skillset. These responses may demonstrate a confidence which young, prospective members of the profession hold. Efforts should be made to instil this self-confidence while in training, and hold onto it once qualified. Our attitude as a profession can at times be deferent and inward-looking, whereas the BPSA would like to see a bold, ambitious and confident mind-set among pharmacists.

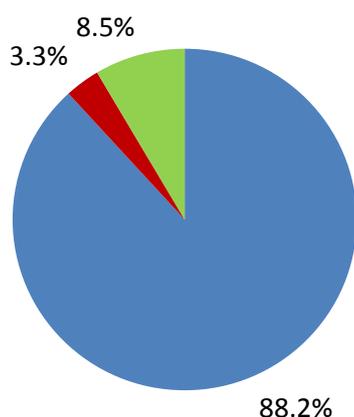
Professional self-confidence must be instilled in students and strengthened as they progress into practice



Experience and Employability

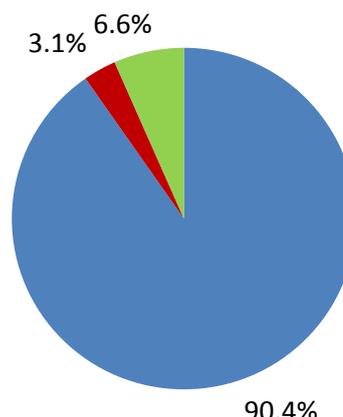
The majority of pharmacy students are keen to gain practical experience alongside their undergraduate studies. Placements are often provided by schools of pharmacy during term-time. Students often seek further experience during their vacation time, arranging this of their own accord. Results from our survey suggest that students would be open to undertaking university placements outside of term-time too. This is practiced in some schools of pharmacy already, with feedback from students showing they have found it useful to their development. Anecdotally, students have told us that they find they gain more from placements during the summer, when they are undistracted by coursework and assessments running concurrently. Having placements arranged during vacation time could allow them to run for longer periods of time, providing greater continuity. This could be preferable to short, sporadic placements through the academic year, when students cannot be out of university for too long.

I would be willing to undertake compulsory placements during vacation time in order to gain more experience



■ Agree ■ Disagree ■ Not sure

I think that pharmacy students should be exposed to clinical environments from the first year of the MPharm degree



■ Agree ■ Disagree ■ Not sure

The BPSA believe that a solid grounding in practice helps students to make an informed choice of pre-registration training programme and eases the transition into working in patient-facing roles. Based on responses to these questions, we recommend that schools of pharmacy consider how they deliver university placements in the future, in consultation with their students.

Delivering university placements during vacation time could be feasible and acceptable to students.



BPSA Policy

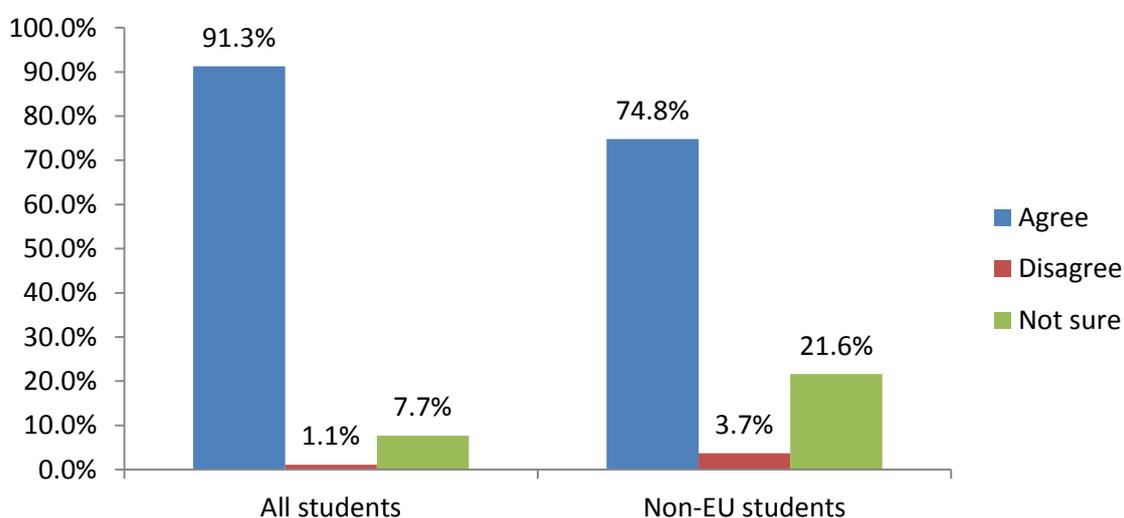
“All pharmacy undergraduate students should be exposed to clinical environments from the first year of study”
(2016)

Many modern MPharm degree programmes have practical elements from year one. Students remark that spending time in practice and engaging with patients early in their degree has given them a deeper understanding of course material, and greater confidence applying this theoretical knowledge to patients. This is an excellent opportunity, which the BPSA believe should be available to all students from the beginning of their degree. The BPSA would like to see exposure to clinical environments maximised at the undergraduate level, and recommend that schools of pharmacy take measures to introduce their students to the clinical aspects of pharmacy practice early in the degree programme.

We expect exposure to clinical environments from the outset of the MPharm programme

Responses to our survey give a clear indication that in all but a small minority of cases, students undertaking an MPharm degree are doing so with the intention of registering as a pharmacist in the United Kingdom. As such, the BPSA feel it is imperative that the number of places at UK schools of pharmacy should closely mirror the availability of pre-registration places. Should a shortfall in pre-registration places emerge, some graduates would be denied the opportunity to undertake pre-registration training and progress towards registration as a pharmacist in this country. Graduates from the MPharm have invested four years of time and money to study for their degree, and should not be denied the opportunity to complete their training and enter the pharmacy profession.

I intend to eventually register as a pharmacist in the United Kingdom

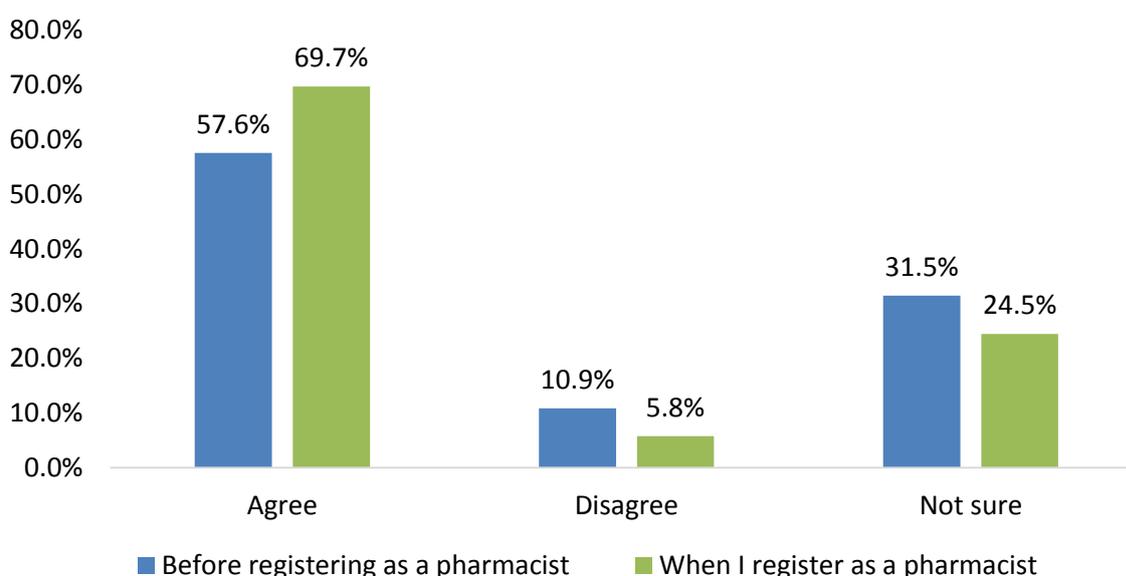




However, it is worth noting that pharmacy isn't an entirely vocational course. Some students may be planning to undertake further study after completing their MPharm, while others may wish to pursue a different career following graduation. Some overseas students intend to return home after graduation or having undertaken pre-registration training, although these appear to be in the minority. A large majority of non-EU students have come to study in the United Kingdom with the intention of registering as pharmacists here after completing their studies.

Greater efforts must be made to link the number of pharmacy students to workforce requirements

I will be more employable than graduates of other science degrees ...



These responses demonstrate the clear value students place on their eventual registration as a pharmacist. Although the MPharm degree is an achievement in itself, students believe their employment prospects are enhanced by registering as a pharmacist. As such, every effort should be made to allow MPharm graduates the opportunity to undertake pre-registration training. Any mismatch between graduate numbers and training places would undercut the hopes and ambitions of pharmacy students. The BPSA will continue to support all students in their chosen path, which in the vast majority of cases is to undertake pre-registration training and register in the UK. The responses to these questions illustrate that, in the eyes of pharmacy students, registration adds value to the MPharm degree.



Visa Requirements for International Trainees

Non-EU Students Only: Before enrolment onto the MPharm degree, I understood that I will only be able to complete pre-registration training in the United Kingdom if I secure a pre-registration training position with a salary exceeding £20,800 (in compliance with the United Kingdom Tier 2 visa scheme)

Number of responses	Cohort	Agree	Disagree
219	1 st – 4 th Year	74.9%	25.1%
		164	55
142	1 st Year	79.6%	20.4%
		113	29
12	2 nd Year	66.7%	33.3%
		8	4
30	3 rd Year	60.0%	40.0%
		18	12
35	4 th Year	71.4%	28.6%
		25	10

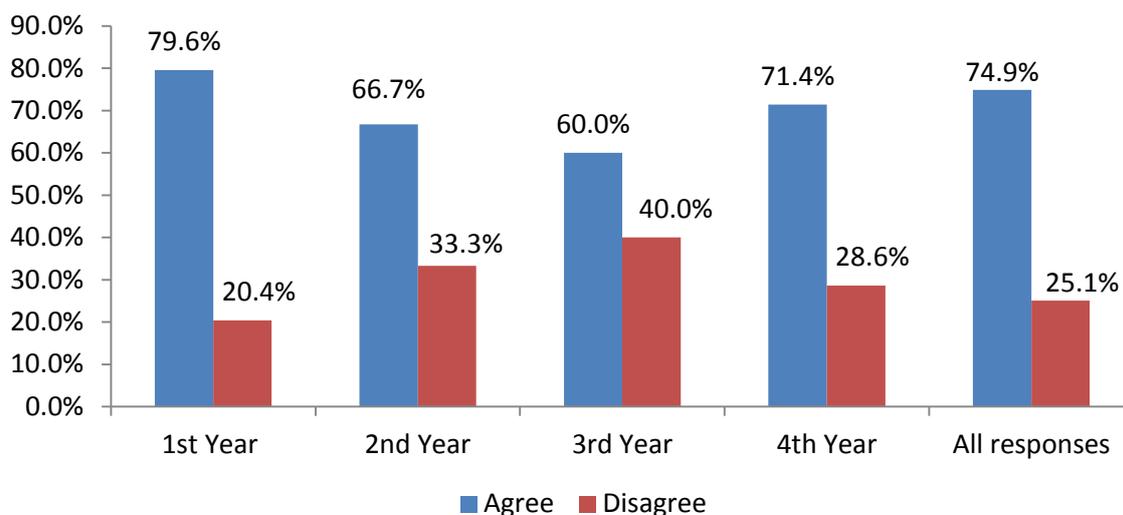
The BPSA believe that prospective international students should be made aware of the [current visa situation](#) before they apply to undergraduate pharmacy training in the UK. It has been brought to our attention since the survey ran that the [salary threshold](#) is currently set at £21,478.

This is an issue the BPSA has been aware of for some time. The visa situation can hinder some international students from securing a pre-registration training place. They are often unaware of the situation until enrolled onto their degree programme and heavily invested in their chosen path. Universities have a responsibility to make any prospective students aware of this situation, and to update them on any changes pertinent to their post-graduate prospects. Foreign countries might not allow students who have studied pharmacy overseas to sit their national registration exam, and as such trainees are unable to register as pharmacists.

BPSA Policy

“Prospective international students should be made aware of the current visa situation before they apply to undergraduate pharmacy training in the UK”
(2016)

International students should be made aware of the visa requirements at the earliest opportunity, preferably prior to choosing to study in the UK. The BPSA notes that international students pay higher tuition fees than home students, and are making a substantial investment in their education. Choosing to study pharmacy in the UK is a major life decision. The visa requirements have extensive ramifications for these students.



We were pleased to find a trend towards better information reaching students in recent years. Schools of pharmacy must ensure that the number continues to reduce to the point that 100% of international students were aware of visa requirements prior to enrolment. Even after enrolment, schools of pharmacy should ensure that the latest visa information reaches their international students.

International students must be made aware of UK visa regulations relating to pre-registration training at the earliest opportunity, prior to choosing to study in the UK

The BPSA notes that in the coming years, circumstances for students originating from outside of the United Kingdom may alter in as-yet-unknown ways due to Britain's withdrawal from the European Union. The BPSA will support EU students as best as possible in light of these unpredictable changes.



Survey Results

I would like to complete my pre-registration training in more than one area of practice (e.g. hospital and community, community and industry, etc.)

(1371 responses)

Agree	Disagree	Not sure
76.7%	6.1%	17.2%
1051	84	236

I would like to complete my pre-registration training year in the following area(s) of practice (tick all that apply):

(1371 responses)

Community	55.8%	765
General Practice	41.1%	563
Hospital (secondary care)	77.5%	1063
Industry	32.6%	447
Academia	12.2%	167
Clinical Commissioning Group	10.3%	141
Other	1.2%	16

I am interested in the following aspects of practice when I register as a pharmacist (tick all that apply):

(1369 responses)

Clinical	87.4%	1197
Commercial	37.1%	508
Leadership	41.3%	566
Research	37.1%	508
General Management	35.4%	485

How much would you be willing to individually contribute for your own personal development, including courses, conferences, qualifications etc. during your first 5 years as a registered pharmacist?

(1370 responses)

£0	3.1%	43
£1 to £499	30.4%	416
£500 to £2,499	37.9%	519
£2,500 to £4,999	14.0%	192
£5,000 to £9,999	9.3%	127
£10,000 to £19,999	3.1%	42
£20,000 or above	2.3%	31



I view pharmacists as being part of a multidisciplinary healthcare team, alongside doctors, nurses and allied health professionals

(1370 responses)

Agree	Disagree	Not sure
98.3%	0.3%	1.4%
1347	4	19

I believe that clinical pharmacy services should be available to patients seven days a week

(1370 responses)

Agree	Disagree	Not sure
84.0%	4.1%	11.9%
1151	56	163

I would be willing to be part of rotas, such as colleagues in medical and nursing professions are, to support care seven days a week

(1369 responses)

Agree	Disagree	Not sure
78.5%	5.3%	16.2%
1075	72	222

I believe that pharmacy teams should be present within accident and emergency departments

(1369 responses)

Agree	Disagree	Not sure
87.3%	2.5%	10.2%
1195	140	34

I view pharmacists as scientists

(1371 responses)

Agree	Disagree	Not sure
82.4%	6.9%	10.7%
1130	94	147

I view pharmacists as clinicians

(1371 responses)

Agree	Disagree	Not sure
90.7%	1.5%	7.8%
1243	21	107



I think that the MPharm degree should teach students how to prescribe medicines
(1368 responses)

Agree	Disagree	Not sure
88.5%	3.5%	8.0%
1210	48	110

I think that newly qualified pharmacists should be able to prescribe medicines
(1370 responses)

Agree	Disagree	Not sure
51.9%	22.6%	25.5%
711	310	349

I would like to be able to prescribe medicines during my career as a pharmacist
(1369 responses)

Agree	Disagree	Not sure
92.5%	1.4%	6.1%
1267	19	83

I would be willing to pay a fee to obtain a prescribing qualification
(1367 responses)

Agree	Disagree	Not sure
69.6%	11.7%	18.7%
952	160	255

I intend to eventually register as a pharmacist in the United Kingdom

Number of responses	Cohort	Agree	Disagree	Not sure
1368	All students	91.3%	1.1%	7.7%
		1249	14	105
218	Non-EU students	74.8%	3.7%	21.6%
		163	8	47

I believe that when I graduate (before registering as a pharmacist) I will be more employable than graduates of other science degrees
(1364 responses)

Agree	Disagree	Not sure
57.6%	10.9%	31.5%
786	149	429



I believe that when I register as a pharmacist I will be more employable than graduates of other science degrees

(1369 responses)

Agree	Disagree	Not sure
69.7%	5.8%	24.5%
954	79	336

I would be willing to undertake compulsory placements during vacation time in order to gain more experience

(1369 responses)

Agree	Disagree	Not sure
88.2%	3.3%	8.5%
1207	45	117

I think that pharmacy students should be exposed to clinical environments from the first year of the MPharm degree

(1371 responses)

Agree	Disagree	Not sure
90.4%	3.1%	6.6%
1239	42	90

Non-EU Students Only: Before enrolment onto the MPharm degree, I understood that I will only be able to complete pre-registration training in the United Kingdom if I secure a pre-registration training position with a salary exceeding £20,800 (in compliance with the United Kingdom Tier 2 visa scheme)

Number of responses	Cohort	Agree	Disagree
219	1 st – 4 th Year	74.9%	25.1%
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30	3 rd Year	60.0%	40.0%
		18	12
35	4 th Year	71.4%	28.6%
		25	10



Using This Document

Authorship

This discussion paper was primarily authored by Thomas Byrne, Secretary General 2016-18, with great support from other members of the Executive 2016-17 and BPSA representatives in interpreting the results of the survey and shaping the discussions presented here. Thanks go to Ash Soni, Jonathan Burton, Ryan Hamilton, Katy Parsons, Gill Hawksworth, and many others for their feedback on the key points outlined in this paper.

About the BPSA

Founded in 1942, the British Pharmaceutical Students' Association is in its 75th year and is the only organisation that solely represents pharmacy students and pre-registration trainee pharmacists across Great Britain. As the official student organisation of the Royal Pharmaceutical Society, the BPSA aims to promote the interests and welfare of pharmacy students. 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 coordinates the running of all our events and services and they are supported by a network of BPSA National and International Representatives in every school of pharmacy.

Media Enquiries

Media enquiries can be made to Thomas Byrne, Secretary General – secgen@bpsa.co.uk



Appendix

The survey was run using a Google Form, with a link provided via the BPSA website homepage and also shared via Twitter and Facebook posts. The survey was split into six sections. Most questions were optional to answer, with some being mandatory to collect vital information (school of pharmacy, year of study, and Home/Non-EU status). Responses for section 5 were screened against responses to the Home/Non-EU status question in section 2, and Home students who answered this question were excluded from analysis. Figures reported were for respondents who explicitly answered 'International Student (Non-EU)' only.

Section 1 gathered information on school of pharmacy and year of study. These questions were both mandatory.

Section 2 gathered information on gender (Male; Female; Prefer not to say) and Home/International student status (Home Student (UK or EU); International Student (Non-EU)). The Home/International status question was mandatory.

Section 3 gathered the following information:

I would like to complete my pre-registration training year in the following area(s) of practice (tick all that apply):

- Community (Primary Care)
- General Practice (Primary Care)
- Hospital (Secondary Care)
- Industry
- Academia
- Clinical Commissioning Group (CCG)
- Other [free text entry available]

I am interested in the following aspects of practice when I register as a pharmacist (tick all that apply):

- Clinical
- Commercial
- Leadership
- Research and Academia
- General Management



How much would you be willing to individually contribute for your own personal development, including courses, conferences, qualifications etc. during your first 5 years as a registered pharmacist?

- £0
- £1 to £499
- £500 to £2,499
- £2,500 to £4,999
- £5,000 to £9,999
- £10,000 to £19,999
- £20,000 or above

Section 3 posed the following statements, with the following options:

- **Agree**
- **Disagree**
- **Not sure**

I intend to eventually register as a pharmacist in the United Kingdom

I would be willing to undertake compulsory placements during vacation time in order to gain more experience

I would like to complete my pre-registration training in more than one area of practice (e.g. hospital and community, community and industry, etc.)

I believe that pharmacy teams should be present within accident and emergency departments

I believe that clinical pharmacy services should be available to patients seven days a week

I would be willing to be part of rotas, such as colleagues in medical and nursing professions are, to support care seven days a week

I view pharmacists as being part of a multidisciplinary healthcare team, alongside doctors, nurses and allied health professionals

I view pharmacists as scientists

I view pharmacists as clinicians

I think that pharmacy students should be exposed to clinical environments from the first year of the MPharm degree

I think that the MPharm degree should teach students how to prescribe medicines

I think that newly qualified pharmacists should be able to prescribe medicines

I would like to be able to prescribe medicines during my career as a pharmacist



I would be willing to pay a fee to obtain a prescribing qualification

I believe that when I graduate (before registering as a pharmacist) I will be more employable than graduates of other science degrees

I believe that when I register as a pharmacist I will be more employable than graduates of other science degrees

Section 5 was aimed at non-EU students only. It posed the following statement:

Before enrolment onto the MPharm degree, I understood that I will only be able to complete pre-registration training in the United Kingdom if I secure a pre-registration training position with a salary exceeding £20,800 (in compliance with the United Kingdom Tier 2 visa scheme)

- Agree
- Disagree

Section 6 invited further comments, with free text entry available.

"All MPharm degrees should be 5 year integrated programmes".

"Prescribing should also be integrated into degrees similar to junior doctors".

"Pharmacists are experts of medicines so their abilities should reflect this".

"Pharmacists are the experts in medicines, and we should be encouraging students, both doing the MPharm degree and other clinical degrees, to acknowledge this specialism and the role it can play in improving patient care through explaining coherently and simply to patients. Also, identifying potential careers for those not minded towards clinical careers, for instance within the private sector advising investment companies / biotech companies, would also be a welcome step".

"I believe MUR accreditation should also be integrated as part of the MPharm degree".

"I don't think it was clear from the start of the MPharm course that we would need to return to studying to obtain certificates/diplomas/MSc's after our pre-reg year. I think the course should contain more content on the hospital side of pharmacy and not focus so much on the community side".

"Once I graduate and get my license, I am going to America to work in the pharmaceutical industry. I'm still registering here just in case and to be a "legitimate" pharmacist. Anyways doing an industrial pre-reg is experience".

"I choose UK as it is a global leader in Healthcare, and to get benefit of its ties with EU and also due to its similarities to other countries Healthcare system like Australia, to a smaller degree Singapore. However, as the restrictions on international students increases and the places for hospital pre-registration decreases, it is worrying. I know there are schools that have started a 5th year for pre-registration but how much more is the system trying to milk



money out of students? It's already expensive enough with the gruelling four year course. How is the council trying to help the students?"

"I want pharmacists to be respected more. From university they put us with the other 'science' school don't even make us feel like we are health related. A master of all drugs and trained to be able to diagnose. But we are still regarded as label makers. The old image of pharmacists needs to be erased from history".

"I am quite concerned about pharmacists' prospects in the future. There has been an oversupply of pharmacists and yet no action is taken to cap the number of students for pharmacy course. Perhaps universities view pharmacy schools as goose that lays golden eggs".

"I believe preparing students for an industry pre reg placement equally well as community and hospital placements is essential".

"Pharmacy is a great profession and from looking at it as a young and aspiring pharmacist I feel that it is under-utilised by the NHS".

"Pharmacists need to have a more employability within the healthcare field".

"A very short and to the point survey. This is going to prove helpful in the future".

"I envision to use my pharmacy degree to help as many people as I can".

"I strongly believe that I'm studying the right thing and that this future career will satisfy my constant search of knowledge and innovation".

"I would rather have science based knowledge so I can work from first principles rather than being 'taught' clinical knowledge".

"To be able to serve the patient well and make sure that they are our priority. To ensure that the medicine being prescribe works most efficiently in the patient body".

"Money".

"Helping the community".

"I would like to work in the clinical field".

"Lots of talk about how pharmacy is changing etc would like to know exactly what that means for me? Secondly - many pharmacists become business owners with independent pharmacies. Would love to know more about that career avenue - how Pharmacists go down that route etc."

"Bringing improvement to healthcare services".

"Very good survey on the whole, I would love to collaborate with whoever made this to get a better scope of the 'other' section of what pharmacy students want to pursue a career in".

"It' a dead end job now. This should be told to every prospective student".



“How current pharmacists are treated by employers greatly influences me, for example the recent issues about Boots putting too much pressure on pharmacists doesn't make me want to work for them. I'm very interested in owning my own pharmacy, but am afraid that large multiples are monopolising the market, meaning that my dream may not be possible in the future”.

“Not sure what the relevance of this is. Thought the survey would be about reviewing the BPSA”.

“As "experts of medicine" it is a disgrace that we cannot prescribe medicines until taking another course which even has its limits. How can this be, for students who go through the daunting experience and intense academia to be mere "shopkeepers" or a corrector of prescriptions. Pharmacy is important and our reward in our payroll is disgraceful. I mean, doctors do not study more pharmacology than us, but they can prescribe everything and we need an additional course? Upon all the studies in pharmaceuticals, we struggle to get industry jobs?”.

“More clinical and hands on experience is really needed for pharmacy students from about year 2 .. especially more practice within a hospital setting is really lacking.. without that it becomes difficult to decide which setting we prefer”.

“I believe strongly that pharmacists should be much more involved in the clinical sides of things, alongside doctors, nurses, etc. of which we do not recognised enough. I believe as pharmacists are the experts of medicines and they understand fully which medicines match up with which illness or disease, they should be more involved in checking and assessing patients' illnesses and injuries that they may have, a kind of role of which GP's do. It is very clear that we are not doctors, however I think the knowledge that we possess enables us to confidently carry out this role in a minor scale. I feel that pharmacists not only need to supply vital medication to their patients, but they need to be more involved in the whole process of it as well. This is also a good way to build a trustworthy relationship between the patient and the pharmacist, simply by being more involved”.

“Pharmacist role is expanding and there should be more introduction about area where pharmacist could play a part, such as care home, mental hospital, etc...”

“I am highly supportive of the recommendations of training pharmacists to be prescribers when they qualify. It definitely reduces medication errors and helps to relieve pressure on GP and doctors. Pharmacists have so much potential to contribute to the healthcare industry instead of just doing professional checks in community pharmacy especially. The clinical role of community pharmacists should also be expanded and not just restrained to hospital pharmacists. I'd also like to see pharmacists and other healthcare professionals in a particular area gathering for socials so that community pharmacists do not feel isolated and less-supported”.

“During my pre- registration year as pharmacist do I have to pay fees to undertake this stage?”

“Might do grad med afterwards”.



“Prescribing wise I think we should have the skills taught but I think further perusal should be during pre reg and clinical diploma, there's no way in 4 years at uni you'll b confident to prescribe unless 4+ and pharmD. Would be willing to invest more into my education but where do I get the money from? Don't like compulsory placements in vacation but strongly urge a clinical facing job, that has taught me more than the MPharm ever will”.

“I believe the pharmacy community needs to push and educate other healthcare professions and the public how important and vital pharmacy is in the community and elsewhere! Where not all failed medics who hate our jobs”.

“Would like more exposure/placements/pre-reg traineeships in alternative careers in pharmacy - e.g. palliative care”.

“I believe pharmacy should have a cap on the number of graduates to insure job security. Pharmacy should be recognised as a healthcare degree. Pharmacy should become more clinical and this should start before Pre-Reg with clinical examinations and vaccination training to be done at university. I also think the Pre-Reg year should be integrated within the MPharm course”.

“Our university does a lot to show us what is new and upcoming in Pharmacy but as a whole, I don't really know where the profession is going so it is a bit scary”.