

# **British Pharmaceutical Students' Association**

## **June 2019 GPhC Registration Assessment Feedback Report**

12/07/2019  
[www.bpsa.co.uk](http://www.bpsa.co.uk)



## 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.

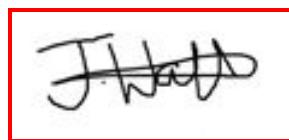
As part of this supportive and representative role, the BPSA invites feedback following registration assessments. The June 2019 registration assessment has attracted significant feedback. As of 7th July 2019, 166 (5.6%) e-mails were received via [preregexamfeedback@bpsa.co.uk](mailto:preregexamfeedback@bpsa.co.uk). Although there were more respondents to the June 2018 paper, the BPSA have been able to identify regular trends from the feedback received about the June 2019 sitting. Most of the feedback received consisted of concerns regarding paper 2 of the assessment.

In 2011, 2013, 2015, 2016, 2017 and 2018, 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.

The 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 2019 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.

**2953 candidates sat the June 2019 registration assessment. The percentages in this report are calculated based on the total number of candidates who sat the June 2019 registration assessment.**



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## 1. Environment

### 1.1. Assessment Centres

A number of candidates responded regarding the environment of the registration assessment.

Some candidates found the temperature regulation during the assessment was not ideal, especially at the centres in Birmingham and London Excel, where either the temperature was too hot or the air conditioning was too cold and distracting in sound.

**Recommendation 1: The GPhC should ensure that there is adequate temperature control at the venues that they select for the registration assessment, particularly in June. Pharmacy associations like the RPS, BPSA, etc. should work with the GPhC to advise candidates on how to self-manage their own temperature; for example, wear light clothing at high temperatures.**

Some candidates who sat the exam at the NEC venue in Birmingham believe it's a good venue but found it difficult to locate the hall the exam was taking place at. During the break between the papers, some candidates mentioned there were insufficient toilet facilities to feel confident enough to visit the toilet and also register in time.

**Recommendation 2: The GPhC should ensure more specific details are provided in the event that assessment places may be difficult to find.**

**Recommendation 3: The GPhC should provide candidates with information about the availability of toilet facilities at their allocated assessment venue.**

Some candidates who sat the exam at the venue in Liverpool stated that they were distracted due to a fire alarm that went off during one of the papers. Even though they were given an extra 10 minutes after the alarm, candidates concentration was affected, impacting on their ability and performance. Candidates also stated that although they were given an extra 10 minutes, the fire drill lasted longer than this time.

**Recommendation 4: The GPhC should where possible be made aware of any anticipated fire drills and try to work with the assessment venue in order to minimise disruption to candidates.**



Furthermore, some candidates at the same assessment venue stated that concentration was affected due to building works that were ongoing throughout the day above the assessment hall and adjacent to the hall.

Some candidates, who sat the exam at the Excel centre, stated that they were distracted due to the presence of birds flying around the assessment hall. Candidates felt impacted as they were unable to concentrate as they were concerned about potential damage to papers or anxious about the birds being present.

Moreover, some candidates at the assessment centre at London Excel stated that the clock was broken in the assessment hall for the first paper and replaced with a smaller clock during the second paper. They felt that this affected their time management, especially throughout paper one and it impacted their performance.

**Recommendation 5: The GPhC should provide candidates with clocks during their assessment to enable candidates to manage their time effectively.**

Candidates at the assessment centre in Bath found their experience smooth and organised.

Most candidates found the invigilators during their assessment were nice and polite throughout the day.

## 1.2. Registration

For the June 2019 sitting, some candidates complained about the registration procedure for both papers. These candidates believed that registration was not consistent or streamlined with some centres having desks split by surname and other centres having one desk for all candidates. They felt this impacted on their ability to use the facilities before the examinations, as registration took longer than anticipated.

**Recommendation 6: The GPhC should where possible attempt to streamline registration for the assessment across all centres so that there is consistency with registration, with more availability of registration desks to allow efficient registration.**

## 1.3. Desk space

For the June 2019 sitting, only some candidates complained about the desk space provided in their feedback emails. These candidates believe the desk space provided was insufficient. Candidates felt



that vast 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 resources, the question paper and answer sheet. This frustrated and distracted candidates, with complaints that this consumed their already insufficient time. Although, this wasn't a very popular theme this sitting, the BPSA believes this is still an issue that needs looking into as it was mentioned in past sittings.

**Recommendation 7: The GPhC should publish the specification of the desks used in the pre-assessment briefs that students receive (or on their website) with some advice on how to manage the desk space provided if larger desks cannot be provided.**

Some candidates found the desks to be of a decent size for the materials required for the assessment.

#### 1.4. Errors

114 (3.4%) respondents commented on the fact that there were question amendments throughout both papers. Candidates felt more anxiety and stress throughout the paper after announcements were made and felt that this impacted on their concentration and thus performance during the paper.

Of these respondents, most commented on the fact that the announcement made for Paper 1 was not compensated with any extra time, however the amendments made in Paper 2 were. What is clear throughout the respondents statements is that this extra time was not consistent through assessment venues and varied between 3-10 minutes.

**Recommendation 8: The GPhC should where possible minimise disruption to candidates, making amendments to papers at the beginning of the assessment instead of throughout**

**Recommendation 9: The GPhC should be consistent with the extra time given if announcements are made in a paper throughout all assessment centres.**



## 2. Paper 1

136 (4.6%) respondents provided feedback on paper 1 of the assessment which highlighted regular themes.

### 2.1 Content

78 (2.6%) respondents believe that the paper wasn't varied enough, therefore only testing some of the topics highlighted in the registration assessment framework ("a significant number of dilution and concentration questions but none concerning displacement values and infusion rates").

Some of the respondents stated that there was some confusion with some of the questions particularly the following questions:

- "round your answer up to the nearest pound and penny",
- The question asking to work out the number of prednisolone tablets required for a reducing dose, when the reducing dose was 2.5mg fortnightly. The use of the word fortnightly confused a number of candidates
- Some candidates were unsure on a question that asked to calculate number of vials to give, as to whether they could use the same vial for subsequent doses or a fresh vial each dose.
- A few candidates mentioned that they were not expecting to be assessed to calculate a child's paracetamol dose during the calculations paper.

Thirty-seven of the respondents believe that paper 1 was not to the same level of difficulty to the sample paper published on the GPhC website and the guidance provided to prepare for the paper was not helpful as it did not reflect the types of questions that the candidates came across in the actual paper.

**Recommendation 10: The BPSA recommends that the GPhC should ensure the resources published and made available to candidates to prepare for the registration assessment are better aligned to the calibre of the actual paper.**

A few candidates mentioned that overall this was a fair paper, with varied questions, but still mentioned some of the issues already covered in this section.



## 2.2 Resources pack

Overall, there were not many comments regarding the resources pack provided for this paper, but a few mentioned they found the pack too large, too time consuming, and a vast number of questions required their use.

Few candidates who provided feedback on paper 1 mentioned that they were not familiar with the algorithm provided for the conversion in the Parkinson's question. This was very time consuming and not easy to follow with eight of the respondents commenting on the quality of the printout, stating it was blurry.

## 2.3 Length of the questions

Some candidates believed that a number of questions were excessively wordy, and they took more time to understand than others. Some believe that these particular questions were unexpectedly verbose compared to the given sample paper. Candidates are aware that it is recommended spending around 3 minutes per question. However, 88 (2.9%) candidates felt that some questions took more than 3 minutes to do as they required multiple steps to get to the answer. The BPSA recognises that there is a specific word count for the assessment and that some questions may take longer to work out than others.

## 2.4 Timing

88 (2.9%) respondents found timing to be an issue, stating that the time provided to complete the questions was not sufficient. Some of the candidates had little or no time to review and double check their answers, with some candidates not able to complete the paper within the allocated time.

**Recommendation 11:** The BPSA recommends that the GPhC ensures an adequate distribution of questions that equate to an average of 3 minutes per question, to allow candidates sufficient time to complete all questions.

## 2.5 Rounding

For the June 2019 sitting the instruction with regards to the rounding of answers had been removed from the instructions on the front of the exam booklet. Around thirty candidates commented that this made rounding answers vague, especially when the question didn't specify any rounding rules. Candidates felt this added ambiguity to the questions and were left confused throughout the paper.



**Recommendation 12: The BPSA recommends that the GPhC ensures clear instructions within questions when it comes to the rounding of answers.**

## 3. Paper 2

148 (5%) respondents commented on paper 2. Most of the feedback the BPSA has received regarding paper 2 had little to no positive feedback. One hundred (3.4%) respondents found that the paper was not fair as it does not reflect the registration assessment framework stating that the paper mostly covered medium to low weight areas. The framework states that around 60% to 70% of the paper will be questions from the high weight area, encouraging candidates to focus most of the revision on these areas. Twenty respondents believe that there were little if any questions with regards to high risk drugs. Some respondents felt that the assessment was more hospital themed than community, with a lack of OTC and law and ethics questions.

**Recommendation 13: The GPhC should publish the proportions of questions per weighted category from the registration assessment framework in the board of assessors report.**

### 3.1. Questions

#### 3.1.1. Incomparable to Practice

Few respondents were concerned as they believe paper 2 was not a true nor accurate reflection of the day to day practice of a newly qualified pharmacist, going into being a practising pharmacy in day one, with some candidates stating that options provided tended to be second or third line options and not first line.

Candidates also believe that the paper was not a true nor accurate reflection of real life practice, stating that some questions limited your options, whereas in reality there are better options available to the pharmacist. For example, some respondents referred to the question in relation to a child who had a cough for 14 days and the options they were expecting were not the ones that were answers. This was later felt within the EMQs with regards to the options to treat the man who had injured his back .

With the advance in technology, the majority of candidates (110 (3.7%) respondents) found the Summary of Product Characteristics (SPC) questions were very time consuming and complex and in real practice it would be a lot quicker to find the information needed.



Commonly, most respondents felt that it was not appropriate, nor acceptable, to perform a clinical check within 1.25 minutes, as “this added unexpected pressure, leading to decisions that are not realistic or representative of real life,” further reflecting the discord with real practice.

**Recommendation 14: The GPhC should ensure that the assessment is an accurate reflection of day to day practice to that of a newly qualified pharmacist.**

**Recommendation 15: To give candidates a better understanding, the GPhC should produce a document detailing the process followed to produce the registration assessment.**

### 3.1.2. Ambiguity

The ambiguity of many questions was a cause for concern amongst 65 (2.2%) respondents. The 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. Examples of this ambiguity include:

- Distinction between transient and common side effect when it comes to diarrhoea and metformin
- Confusion with non-sale of fluconazole for ring worm as it is both not licensed for use, and not used for that condition
- Question stating which medication should be prescribed by brand; when both filgrastim and ciclosporin should be prescribed in this way but were both answers
- Question with regards to vancomycin also had more than one potentially correct answer

Few candidates reported an SPC question with regards to a prescription of Sativex to be ambiguous due to the date on the prescription and not being certain as to what the date upon receiving the prescription would be, when sitting the assessment.

**Recommendation 16: The GPhC should review and 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. Short answer questions

25 (0.8%) candidates who provided feedback for paper 2 have mentioned there were too many complex calculation questions in the paper. These calculations were not of basic number sense and were very time consuming to do without a calculator meaning candidates found that the



recommended 1.25 minutes per question was not enough. In day to day practice this would not be the case

**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**

### 3.1.4. Extended matching questions (EMQs)

60 (2%) of the candidates in their responses referred specifically to questions 90 to 120 stating they were worded in such a way that it made it difficult to extract what was being asked in the question and was confusing. Candidates felt that the question sets for EMQs were quite short in that there were 5-6 sets of 2-3 questions as opposed to the candidates expecting 3 sets of 6-7 questions.

There were some EMQs that required the use of resources which candidates felt it was really time consuming, especially coming up to the end of the paper when candidates were pushed for time

**Recommendation 18: The GPhC should restrict the amount of EMQs that require resources to ensure candidates have sufficient time to complete each question.**

**Recommendation 19: The GPhC should restrict the number sets of EMQ questions, or provide sample questions of similar length to appropriately prepare candidates for these types of questions.**

### 3.1.5. Specific questions

Over 30 (1%) candidates commented specifically on an SPC question with regards to a methadone register and working out the discrepancy. Many candidates had spent 10 minutes alone on this question when there was an announcement that the question contained an error and needed amending. Candidates were not expecting such a detailed question to be in the assessment to work out in the given 1.25 minutes.

Candidates were also thrown by the presence of questions with regards to audits, behavioural change and alcohol.

**Recommendation 20: The GPhC should work together with pharmacy associations, such as the RPS and BPSA, and training providers to ensure that candidates understand that they are being**



**assessed for what they have learnt during their pharmacy degree and not just the pre-registration year.**

### 3.2. Length

The majority of the candidates said the paper was too long and some questions were excessively worded. They are aware that the recommended time per question is 1.25 minutes, and believe it is unrealistic. Some candidates said it took them 1.25 minutes to read through the questions and understand what is 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. Some candidates felt that the exam was a test of speed rather than knowledge and skills of a newly qualified pharmacist.

### 3.3. Resources

145 (4.9%) candidates who provided feedback found the resource pack too large and overall the assessment contained too many questions requiring the use of resources, specifically the SPC. Candidates felt there was not enough time to read the question, read through the SPCs and answer the question in the recommended 1.25 minutes per question. Candidates also felt these questions were too complex to complete within 1.25 minutes. Again, candidates feel this is not a true reflection of real life day to day practice.

Candidates have taken the advice and recommendations provided and are therefore familiar with the layout of the SPCs, but they were thrown by the number of questions that required an SPC to answer. Many respondents stated that this resource was largely incomparable to real life practice due to the availability of technology in most pharmacy settings.

**Recommendation 21: The BPSA recommends that the GPhC should provide less questions requiring the use of resources and should provide a smaller resources pack.**

A candidate also commented that within an SPC question there was an ambiguous question that had more than one correct answer, as both sodium chloride and glucose could be used. This further extended the time due to increased confusion.

Few candidates thought that the paper had a good range of different resource questions with differing types of resources throughout.



Another candidate found the SPCs in the assessment to be shortened in comparison to SPCs they had used in mock assessments.

### 3.4. Timing

75 (2.5%) respondents stated they found timing to be an issue. Candidates felt like the registration assessment was a test of speed, rather than a test of clinical knowledge and competency of a newly qualified pharmacist.

As already highlighted in the report, candidates found the recommended 1.25 minutes per question not long enough to understand the question, use resources where needed and to answer the question safely and realistically. Candidates ended up guessing some answers to have an answer for every question, but as a Pharmacist, candidates recognise this is not a safe way to practice. 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.

Respondents felt that the unreasonable time pressure within the assessment meant that they were unable to make safe and informed decisions, which are not a true representation of practice. Candidates 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.

## 4. The Registration Assessment Framework

100 (3.4%) respondents had strong views regarding the relevance of the Registration Assessment Framework to the actual assessment. Candidates formed the basis of their revision using the Registration Assessment Framework but then felt that the actual assessment was not consistent with the framework. After sitting the registration assessment, a clear majority of the candidates don't know how to prepare differently for the assessment if they were to have a second sitting as they have followed the advice and recommendation provided in the Registration Assessment Framework and GPhC website. This is also the case for respondents who had sat the assessment for a second or third time. Candidates have expressed disappointment that after 5 years of hard work and positive progress, it comes down to passing a paper which isn't a true representation of the Registration Assessment Framework and day to day practice to become a registered pharmacist.

Almost all (135 respondents 4.6% of candidates) felt that the content of the paper was mainly from medium to low weight topics. They believe that 60% to 70% of questions in the paper were not from



the high weight topics highlighted in the Registration Assessment Framework, with one candidate believing that only 20% of the paper covered high weighted topics.

Few candidates felt that the assessment was not representative of the different training environments, with a lack of OTC related questions and law and ethics questions. However, few candidates felt that the paper was a good mix of the different training environments and contained a balanced variety of questions

**Recommendation 22: The GPhC should ensure that the Registration Assessment Framework is not misrepresentative nor misleading and provides trainees with sufficient information in order to structure their learning and revision accordingly.**

**Recommendation 23: The GPhC should ensure that the registration assessment is reflective of their Registration Assessment Framework.**

Few candidates found the framework provided a good overview of what to expect in the assessment and was therefore a fair representation of the knowledge and skills expected of a pharmacy professional.

## 5. The GPhC sample papers

75 (2.5%) respondents expressed their concerns as the GPhC sample papers were incomparable in terms of complexity, to the actual paper. Candidates had passed and answered the sample questions with relative ease in comparison to the actual assessment and felt misled by the sample questions published by the GPhC.

**Recommendation 23: The GPhC should publish sample questions of representative difficulty, complexity and length to the registration assessment, and they should choose these questions from the same pool that the registration assessment questions are chosen from.**

**Recommendation 24: The GPhC should provide at least 2 sample papers for each paper to help candidates have a better understanding of the wording and types of questions as well as a better feel for the timing of the paper**



## 6. 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.

Some candidates 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 this turned out to be the complete opposite. Respondents had paid considerable amounts of money for some assessment and felt angered and disappointed at the cost of such incomparable assessments.

**Recommendation 25: 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.**

**Recommendation 26: The BPSA and RPS should work closer with the GPhC to help address some of the issues raised in this report and therefore allow candidates to be more prepared for the registration assessment.**

## Authorship

This document was written by Jessica Watt, pre-registration Pharmacist and BPSA Graduate Officer 2019-2020. It has been endorsed and accepted by the BPSA Executive of 2019-2020.

## About the BPSA

Founded in 1942, the British Pharmaceutical Students' Association is in its 77th 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.



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

## Media Enquiries

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

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