

Consultant Pharmacist Individual Credentialing – Assessment Regulations

These are the Regulations that govern the consultant pharmacist individual credentialing assessment process. You should read them carefully, in conjunction with the [Consultant Pharmacist individual credentialing candidate guidance](#), so that you understand the procedures around the individual credentialing assessment process. You must abide by these Regulations.

Definitions

The following definitions will apply to these Regulations:

“Appeal form” means the form an applicant may choose to use to submit an appeal against the outcome of a consultant pharmacist competency committee.

“Applicant” means an individual undertaking the consultant pharmacist credentialing assessment programme.

“Assessment Regulatory Committee” is made up of independent pharmacist and lay representatives and is chaired by a co-opted member of the Education & Standards committee.. The committee has responsibility for considering appeals made or referred to it in accordance with these Regulations.

“Consultant-ready pharmacist” means an individual who has been credentialed by the RPS as having met the consultant pharmacist curriculum outcomes via the programme of assessment **but** who is **not currently** working in an [approved consultant pharmacist post](#).

“Consultant pharmacist” means an individual who has been credentialed by the RPS as having met the consultant pharmacist curriculum outcomes via the programme of assessment **and** who is **currently** working in an [approved consultant pharmacist post](#).

“Consultant pharmacist competency committee (CPCC)” means a group of appropriately qualified experts as determined by the RPS who reach final decisions on individuals’ progression to being credentialed as consultant-ready.

“Consultant pharmacist credentialing” means the process of undertaking the programme of assessment as detailed in the RPS consultant pharmacist curriculum to become credentialed as consultant-ready.

“Curriculum” means RPS consultant pharmacist curriculum which is the statement of the intended aims and objectives, content, experiences, learning outcomes and processes of a programme, including a description of the structure and expected methods of learning, teaching, assessment, feedback and supervision.

“CPCC chairperson” means either an experienced CPCC assessor or senior RPS representative who has undertaken additional training to chair CPCCs.

“Directory of approved consultant pharmacist posts” means the directory of all approved consultant pharmacist posts which will be maintained by the RPS and publicly accessible on the [RPS website](#).

"Disability" means a disability within the meaning of section 6 of the Equality Act 2010.

"The Equality Act" means the Equality Act 2010 (and any reference to a statute includes: that statute as amended from time to time; any statute re-enacting or replacing it; and any statutory instruments, Regulations or rules made under that statute or any statute re-enacting or replacing it).

"Education & Standards committee" means the committee responsible for the overarching quality assurance of all RPS assessment and credentialing activity.

"Head of Assessment & Credentialing" means the Head of Assessment & Credentialing in the Education & Professional Development directorate of the RPS or their nominee.

"Programme of assessment" means the set of individual assessments used to assess the curriculum outcomes. The synthesis of these individual assessments into a programme allows for integrated judgments on an individual's performance.

"Programme of learning" means the matrix of the capabilities, outcomes and descriptors defined in the RPS consultant pharmacist curriculum determined as necessary to deliver the services defined by the RPS consultant pharmacist curriculum purpose.

"Reviewer" means a member of the consultant pharmacist competency committee who reviews an applicant's portfolio as part of the programme of assessment.

"RPS" means the Royal Pharmaceutical Society.

"RPS Website" means the dedicated website of the Royal Pharmaceutical Society found at the following address: <https://www.rpharms.com/>.

"Senior RPS representative" means a senior member of the RPS staff or RPS governance structure as determined by the Chief Education & Membership Officer.

Scope

1. These Regulations apply from 26 January 2023.

Language of the consultant pharmacist credentialing process

2. All aspects of the consultant pharmacist credentialing process will be carried out in the English language.

Submitting a portfolio

3. Before an individual submits a portfolio, they must have:
 - a) Uploaded and mapped evidence of learning against each of the curriculum learning outcomes.
 - b) Completed the consultant pharmacist credentialing application form.

- c) Paid the portfolio assessment fee.
4. In order for the portfolio to be processed by the RPS and forwarded for review by a consultant pharmacist competency committee, the applicant must pay the portfolio submission fee.
5. Portfolios must be submitted by the relevant assessment window submission deadline to be considered by a corresponding consultant pharmacist competency committee. Submission window and deadlines are available on the [RPS website](#).
6. An applicant may submit for assessment of (an) individual domain(s). Individuals will only be credentialed as consultant-ready once all domains have been successfully assessed. Applicants wishing to submit for assessment of (an) individual domain(s) may submit an application by email or any other appropriate form, setting out the domain(s) in which they wish to be assessed.
7. If an applicant is a person with a disability and requires reasonable adjustments to be made to the portfolio submission process, they should contact the Head of Assessment & Credentialing to discuss alternative portfolio mechanisms.

Reviewing individual portfolios

8. Once the relevant portfolio submission deadline closes, portfolios will be checked internally by RPS staff to ensure the required documentation has been provided by the applicant.
9. RPS will convene a consultant pharmacist competency committee to review the portfolio against the outcomes detailed in the programme of learning.
10. Consultant pharmacist competency committee membership will be comprised of a minimum of three reviewers with representation from the following areas: clinical expertise in the applicant's area of clinical practice, experience of pharmacy leadership with a system wide role, a practising consultant pharmacist, and academic expertise. The committee will be convened by the RPS and chaired by a CPCC chairperson.
11. Prior to assessing a portfolio, members of the consultant pharmacist competency committee will be required to declare any conflicts of interest in line with the RPS conflict of interest policy. Should a reviewer declare a conflict of interest, an alternative reviewer will be used to assess the portfolio.
12. Following independent review of the portfolio by each reviewer, a meeting will be convened of the consultant pharmacist competency committee, either remotely or in person, where the portfolio will be discussed and unanimous consensus on the final outcome for each domain achieved.
13. The potential outcomes for each domain are as follows:
 - **Standard met** – the individual has provided satisfactory evidence to demonstrate achievement of all the consultant pharmacist curriculum outcomes in that domain as defined in the programme of learning.

- **Standard not met** – the individual has not provided satisfactory evidence to demonstrate achievement of all the consultant pharmacist curriculum outcomes in that domain as defined in the programme of learning. Written feedback will be provided detailing which elements of the evidence did not meet the standard and the action required to demonstrate the standard on resubmission. The applicant will be required to be reassessed in the domain(s) in which they did not demonstrate achievement of all outcomes. Reassessment will be charged according to the assessment fees in place at that time.
 - **Insufficient evidence** - the individual has not provided enough evidence to demonstrate achievement of part or all the consultant pharmacist curriculum outcomes as defined in the programme of learning. While some of the evidence provided indicated that the individual may be practising at the expected level, there are gaps in the evidence to confidently conclude the outcome had been fully achieved. Written feedback will be provided detailing which elements of the evidence were insufficient and the action required to demonstrate the standard on resubmission. The applicant will be required to be reassessed in the domain(s) in which there was insufficient evidence. Reassessment will be charged according to the assessment fees in place at that time.
14. The potential overall outcomes of the consultant pharmacist competency committee are as follows:
- **Candidate credentialed** – the individual has provided satisfactory evidence to demonstrate achievement of all the consultant pharmacist curriculum outcomes as defined in the programme of learning. The applicant is credentialed as ‘consultant-ready’ and is eligible to apply for approved consultant pharmacist posts.
 - **Candidate not credentialed** – the individual has not provided satisfactory evidence to demonstrate achievement of all the consultant pharmacist curriculum outcomes as defined in the programme of learning. Written feedback will be provided detailing which elements of the portfolio evidence have not been met. The applicant will be required to be reassessed in the domain(s) in which they did not demonstrate achievement of all outcomes. Reassessment will be charged according to the assessment fees in place at that time.
15. All applicants will receive formative feedback on their submission from the consultant pharmacist competency committee regardless of the outcome of the assessment.
16. Assessment outcomes will be delivered in writing to applicants within six weeks of the corresponding submission closing date.

Cheating and misconduct during the consultant pharmacist credentialing process

17. For the purposes of these Regulations, “cheating” in the consultant pharmacist credentialing process includes:
- a) Falsifying evidence or information for inclusion in the portfolio.

- b) Copying, stealing, appropriation or use of the work of another as evidence for the portfolio assessment.
 - c) Permitting or assisting another to copy or use one's own work as evidence for their portfolio assessment.
 - d) Using, attempting to use, assisting another to use or attempting to assist another to use any other unfair, improper or dishonest method to gain advantage in any part of the assessment process.
18. For the purposes of these Regulations, "misconduct" in relation to the portfolio assessment includes writing in or attaching to any papers, or giving orally or electronically, any message or appeal to members of a consultant pharmacist competency committee with the intention of influencing their decision.
19. Where a member of RPS staff, a member of the consultant pharmacist competency committee or other complainant suspects an applicant of misconduct, they should report the matter promptly in writing, by letter or email, to the Head of Assessment & Credentialing.
20. Upon receipt of an allegation of misconduct, the Head of Assessment & Credentialing will decide upon examination of the initial evidence whether the allegation should be investigated and, if so, what form the investigation should take.
21. The Head of Assessment & Credentialing will write to the applicant informing them that the allegation has been received and what will happen next, including (but not necessarily limited to):
- a) Whether:
 - 1. The allegation will be investigated to obtain more details before it is referred to the Assessment Regulatory Committee; or
 - 2. The allegation will be referred straight to the Assessment Regulatory Committee with such details as are available; or
 - 3. No action will be taken by the RPS in relation to the allegation;and (if relevant)
 - b) Requesting a written statement from the applicant of observations on the allegation.
22. If the Head of Assessment & Credentialing decides that it is appropriate to investigate the allegation before it is referred to the Assessment Regulatory Committee, they will carry out the investigation with an independent qualified pharmacist appointed by the RPS.
23. The investigation by the RPS will depend on the nature of the allegations raised:
- a) The investigation will include consideration of the RPS's written observations and may include obtaining written and/or oral evidence from the complainant,

the applicant, and/or other persons and examine other evidence and other written materials as deemed necessary by the RPS.

- b) The length of the investigation will usually depend on the complexity and seriousness of the allegations. The investigation will be completed as efficiently as reasonably practicable. It is expected that it will normally be completed within 28 days of the letter being sent informing the applicant that an allegation has been made; however, it is recognised that this may not be possible in all cases. For the avoidance of doubt, the additional duration of an investigation over the 28-day period will not invalidate it in any way.
 - c) The RPS will make reasonable efforts to ensure the applicant and other person(s) involved are kept informed of progress. The complainant may also be kept informed, depending upon their interest in the matter and at the discretion of the RPS.
24. At the end of the investigation, the details of the investigation, including the applicant's written observations on the findings and any recommendations of the investigators, will be referred to a meeting of the Assessment Regulatory Committee. For the avoidance of doubt, the Assessment Regulatory Committee members are not bound to follow the investigators' recommendations.
25. Upon receipt of details of a case, the Assessment Regulatory Committee will meet in private to decide, based on the documents before it, whether there is a case to answer.
- a) If they decide there is no case to answer, no further action will be taken by the RPS.
 - b) If they decide there is a case to answer, the application will not be forwarded for review by the consultant pharmacist competency committee and the portfolio will need to be resubmitted at a future committee.
26. The applicant will be informed in writing of the decision of the members of the Assessment Regulatory Committee. The complainant may also be informed, depending upon their interest in the matter and at the discretion of the RPS.

Reasonable adjustments

27. The RPS will make reasonable adjustments to the consultant pharmacist credentialing process in accordance with section 20 of the Equality Act 2010 for any applicant who is a Disabled Person.
28. Any applicant who is a Disabled Person and feels that the arrangements for the portfolio assessment will cause them a substantial disadvantage as a result of their disability, may apply within a reasonable timeframe to the Head of Assessment & Credentialing for reasonable adjustments to be made. The applicant may use the Reasonable Adjustments form provided or may submit an application in writing by email or in any other appropriate form, setting out:
- a) The nature of the applicant's disability, together with supporting medical evidence and/or an educational psychologist's report registered with the

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appropriate healthcare regulator and written after the applicant's 18th birthday;
and

- b) The adjustment(s) the applicant wishes to be made (if identifiable).
29. Where an applicant does not apply under Regulation 27, but the RPS is nevertheless aware that the applicant is a Disabled Person, the Head of Assessment & Credentialing shall consider whether it is necessary for any reasonable adjustments to be made to the portfolio assessments in order to prevent that applicant from experiencing any substantial disadvantage as a result of their disability.
30. For the purposes of making a decision, the Head of Assessment & Credentialing may request additional information from:
- a) The applicant
 - b) The applicant's professional coach (providing the applicant has given consent)
 - c) The applicant's expert mentor(s) (providing the applicant has given consent)
 - d) The applicant's medical practitioner(s) (providing the applicant has given consent)
 - e) Any other person whom the Head of Assessment & Credentialing at his or her absolute discretion considers appropriate (providing the applicant has given consent)
31. The Head of Assessment & Credentialing shall notify the applicant of the outcome of the review with reasons, and confirmation of any reasonable adjustments which will be put in place for the applicant's assessment by email, or by such other means as may be appropriate, as soon as reasonably practicable.
32. Any applicant who is dissatisfied with the Head of Assessment & Credentialing's decision as notified under Regulation 30 may ask for the Assessment Regulatory Committee to review the matter. Any request for a review should be made in writing or email or by such other means as may be appropriate as soon as reasonably practicable.
33. Following receipt of a request for a review under Regulation 31 or the RPS having become aware that the applicant is a Disabled Person under Regulation 28:
- a) The applicant shall have an opportunity to make further representations to the Assessment Regulatory Committee in person or by any other convenient means;
 - b) The Assessment Regulatory Committee may request additional information from those individuals referred to in Regulation 28; and
 - c) The Assessment Regulatory Committee shall decide whether it is necessary for any reasonable adjustments to be made and, if so, what adjustments, if any, can reasonably be made.

34. The RPS shall notify the applicant of their decision and reasons including details of what adjustments, if any, can reasonably be made in writing or by such other means as may be appropriate as soon as reasonably practicable.
35. Subject to compliance with the Equality Act, nothing in Regulations 26-33 above shall be read as implying that the RPS will allow any adjustment to the competence requirements of the assessment on the grounds of disability.
36. The RPS will not consider any request from an applicant for reasonable adjustments on the basis of temporary personal circumstances (which are not a disability under the Equality Act) which the applicant considers might affect their ability to undertake the assessment.

Accreditation of prior certified learning (APCL)

37. The RPS may, at its discretion, give formal recognition to previous learning which has been formally assessed and for which a certificate has been awarded; this may lead to exemption from elements of the final portfolio assessment.
38. The RPS will only consider APCL applications which adhere to the following principles:
 - I. APCL will not be awarded for high-stakes curriculum outcomes. All individuals undertaking the programme will have to demonstrate achievement of all high-stakes outcomes through this curriculum's programme of assessment.
 - II. APCL will only be awarded to exempt individuals from being assessed against medium-stakes and low-stakes outcomes.
 - III. All APCL requests must be relevant, authentic and valid.
 - IV. All APCL requests must be at the equivalent level of performance as described in this curriculum's programme of learning.
 - V. All APCL requests must be provide evidence of certified learning in the area of clinical expertise for which individuals are seeking credentialing at consultant level.
 - VI. Patient safety must never be compromised.
39. Those who have previously undertaken the RPS Faculty assessment will be eligible for automatic APCL in line with the principles described in Regulation 37.
40. Individuals applying for exemption from assessment via APCL of other certified learning must provide a copy of the relevant certificate and/or transcript, information on the curriculum outcomes and/or assessment criteria and will need to undertake a mapping exercise to demonstrate which curriculum outcomes the certified learning meets.
41. Previous (recent) certified learning can be submitted as contributing evidence for high-stakes outcomes as part of the portfolio.

Exemption from credentialing

42. Consultant pharmacist post-holders, who were appointed to and employed in, a post listed on the [RPS directory of consultant pharmacist posts](#) prior to the introduction of the consultant pharmacist credentialing process, are exempt and do not need to undergo consultant pharmacist credentialing to hold a consultant pharmacist post.

Appeals

43. An applicant who reasonably believes that a procedural and/or administrative irregularity may have occurred in the consultant pharmacist credentialing process may submit an appeal.
44. A completed [appeal form](#) or full written statement of the appeal which sets out the grounds for the appeal must be submitted to the Head of Assessment & Credentialing either by email within 28 days of the notification of the assessment results. The appeal fee must also be received by the RPS within this 28-day period.
45. The fees for each appeal are set out in the [appeal form](#). Appeals will not be considered until payment has been received.
46. The RPS will acknowledge receipt of the appeal and associated appeal fee in writing within 10 working days. As part of this acknowledgment, it may also request additional details or information in relation to the applicant's appeal.
47. An appeal can only be made if the applicant reasonably believes that there were **procedural** and/or **administrative irregularities** or **mistakes** in the conduct of the consultant pharmacist credentialing process, which were of such a nature as to cause reasonable doubt about whether the members of the consultant pharmacist competency committee would have reached the same conclusions had the irregularities not occurred.
48. An appeal cannot be made against the judgment of any member(s) of the consultant pharmacist competency committee i.e. an applicant's unsubstantiated opinion that their portfolio has been assessed harshly or incorrectly by member(s) of the consultant pharmacist competency committee will not constitute valid grounds for an appeal.
49. All appeals that meet the definition in Regulations 47-48 will be anonymised and referred to the next available meeting of the Assessment Regulatory Committee.
50. Before coming to a decision, the Assessment Regulatory Committee may ask anyone involved in the appeal for their observations and may refer the appeal for comment to those who have been immediately concerned with assessing or supporting the appellant. This additional information will be shared with the appellant and the appellant will be given the opportunity to comment on the information before the meeting.
51. The Assessment Regulatory Committee will meet in private and decide on the basis of the documents before it whether to:
- a) Uphold the appeal; revise the consultant pharmacist competency committee outcome, if it believes from the evidence a procedural and/or administrative irregularity or mistake has occurred;

- b) Uphold the appeal; expunge the attempt from the appellant's record and refund the original assessment fee, if it believes from the evidence a procedural and/or administrative irregularity or mistake has occurred;
 - c) Refuse the appeal if it believes there is no evidence a procedural and/or administrative irregularity or mistake has occurred.
52. The decision of the Assessment Regulatory Committee is final with regards to appeals.

Complaints

53. This section of the Regulations only covers complaints which do not relate to reconsideration of the outcome of a consultant pharmacist competency committee. Applicants wishing to have the outcome reconsidered should follow the Appeal process set out in Regulations 42-51.
54. An applicant who wishes to complain about any aspect of the consultant pharmacist credentialing process should submit a written report to the Head of Assessment & Credentialing. A complaint will not result in a reconsideration of the competency committee outcome.
55. The Head of Assessment & Credentialing will investigate and respond to the complaint as soon as practicably possible.