

HEIW Call for evidence: Shaping our education strategy

1. Educational Quality

How do we ensure that our learners are supported with quality learning experiences that focus on the knowledge and skills needed to deliver high quality care and improved patient outcomes?

Prompt questions

- How well prepared are our learners to take up healthcare roles?
- What are the key issues driving attrition from healthcare education programmes?
- Does the education we commission and deliver help NHS Wales to deliver care aligned with the Duty of Quality STEEEP standards (Safe, Timely, Effective, Efficient, Equitable, Person-Centred)?
- How effective is our approach to practice-based learning?

We are responding on behalf of the Royal Pharmaceutical Society, the professional leadership body for pharmacists and pharmaceutical scientists.

At undergraduate level, the importance of supervised clinical placements in practice across all settings, is essential to help develop and shape the clinical skills of future pharmacists, ensuring we develop a workforce with the future skills needed for the NHS in Wales. This requires adequate ongoing investment to support the programme. Together with a workforce with the necessary educational supervisory skills and knowledge to support undergraduates in such placements.

The integration of the four pillars of practice into all pharmacist roles in the future is needed. A tiered workforce approach of advancing practice, through credentialing assessment aligned to the four pillars of practice within the [RPS pharmacist post registration curricula](#) (see **Appendix 1 below**) is essential.

The curriculum has been designed to closely align with the four pillars of advanced practice recognised across healthcare professionals: clinical practice, leadership and management, education and research.

There has been significant progress within the credentialing programme, starting at an early stage with the post-registration foundation pharmacist programme in Wales, through to advanced and consultant level practice.

However, the four pillars of practice are yet to be embedded throughout the pharmacist workforce. For example, few pharmacists are directly involved in research, leadership and management. In the absence of a more formal career pathway and consistently applied job planning — with the four pillars of practice embedded — there is a risk these will not be viewed as integral to career development.

Education and training can also be seen as an extra duty for many, rather than an integral part of their role. Data from the [RPS annual credentialing report 2024](#), shows that for post-registration foundation candidates, leadership and management was the domain with the lowest pass rate, for core advanced practice it was both education and research and for consultant practice it was leadership and management. The workforce must be supported to develop their practice in these non-clinical domains.

Our most recent workforce wellbeing survey conducted at the Royal Pharmaceutical Society (RPS), open to pharmacists and pharmacy technicians, showed that 87% of respondents felt they were at high risk of burnout (<https://www.rpharms.com/recognition/all-our-campaigns/workforce-wellbeing>). Whilst the reasons articulated in the report are varied and multifactorial, a lack of protected learning time was a noticeable highlighted contributory factor. Cognitive overload remains a key issue driving attrition from healthcare education programmes, with time and space needed to engage in learning and development.

Job planning is an excellent opportunity to ensure that the four pillars of professional practice: clinical practice; leadership and management; education; and research are integrated into everyone's roles in the future. It can also ensure appropriate, planned time for developing essential clinical and non-clinical capabilities in the workforce.

Practice based learning with a broad range of supervised learning events (SLEs) and other evidence types, including direct observation, to evidence practice in an e-portfolio to clearly demonstrate the outcomes at the 'does' level is essential for ongoing assurance.

A culture of education and training must be embedded in practice, with time to develop self and others, supporting workforce development.

There is a need to develop and equip educational supervisors with the knowledge and skills to support workforce development within the post registration space.

Appendix 1.

Purpose of RPS Credentialing

In order to ensure pharmacists are delivering the highest quality of patient care, RPS have developed a credentialling programme. This provides assurance to commissioners and employers that pharmacists are practising safely at the level stated.

RPS credentialing assures the professional capability of pharmacists practising beyond initial registration through structured portfolio assessment. It confirms competence, experience, and impact at three advancing levels of practice:

Enhanced practice

Core Advanced practice

Consultant practice

The system provides a supportive development pathway and formal **assurance to patients, employers, and the public** that credentialed pharmacists can deliver more complex clinical services safely and effectively, aligning professional development with service and patient needs.

2. Curriculum and Pedagogy

How do we ensure that healthcare education remains pedagogically sound and able to adapt and respond to scientific and technological advance?

Prompt questions:

- What skills will our workforce need in the future?
- What should future curriculum focus on?
- How do we make education and training more flexible and agile so that it can respond to changing healthcare models?
- How can we foster better inter-professional education to help break down barriers between different professional groups?

The domain headings in the GPhC Standards for initial education and training of pharmacists and all RPS post-registration curricula are aligned, providing a clear continuum of professional learning and development from the point of entering the MPharm degree through post registration foundation, advanced and to consultant practice.

The domains closely mirror the four pillars of advanced practice recognised across healthcare professionals: clinical practice, leadership and management, education and research.

Education and professional development in the post registration space, following a 5 domain, 4 pillar curricula, must be truly embedded and sustainable to develop a workforce working to advanced and enhanced levels of practice.

Experiential learning within the workplace, with practical, hands-on learning, demonstration of capability and reflecting on practice, supported by an e-portfolio to record evidence against curriculum outcomes is essential. This will develop pharmacists who can deliver complex care, together with leading and managing a changing and dynamic healthcare environment. The workforce must be supported to build the capacity and skills needed of educational supervisors to support this approach.

The importance of multidisciplinary team working for patient outcomes is well described and helps create a better understanding across healthcare professionals of the skills and attributes of different professions.

The future pharmacy workforce must be a flexible and agile one, with appreciation and understanding of the different sectors of healthcare. They must be supported to develop the skills and adaptability to fully embrace digital and technological advancements to support patient outcomes and efficiency. Training should be based on outcome focused models, where flexible models of learning are the norm to support development. Assurance must happen within the workplace, with demonstration of competency at the 'does' level.

With the advent of all new pharmacists registering from 2026 having the prescriber ready status, together with significant upskilling of the current workforce to develop the skills and competencies for prescribers, this provides a huge opportunity for the NHS in Wales to fully utilise these skills for patient benefit. From data highlighted in the most recent refresh of [Pharmacy: delivering a Healthier Wales](#), in April 2025, over 15,000 pharmacist independent prescriber consultations were carried out in community pharmacy alone with patients across Wales. We must ensure education programmes for pharmacists in this space continue to support their development as prescribers and enable them to expand their practice. It is critical we ensure there is adequate support for those newly qualified pharmacists who will now have the prescribing qualification from the first day of registration.

3. Inclusion and Equity

How do we address barriers (such as age, geography, background, ability) to extend opportunities for all learners to access education or training that improves access to healthcare roles and career progression?

Prompt questions:

- What are the key barriers to a more inclusive approach?
- What are the key areas that you think this strategy should address?

Healthcare environments should reflect the diversity of the populations they serve. Training programmes should ensure we attract, train and keep the best talent in Wales. Pharmacy working environments must have a culture of belonging that is inclusive, respectful, safe, celebrates diversity and supports wellbeing.

For pharmacists, a multi-sector approach to foundation pharmacist training in Wales provides an attractive option for trainee pharmacists to develop the skills and competencies necessary to meet the General Pharmaceutical Council (GPhC) initial education and training standards for pharmacists. The subsequent post-registration foundation pharmacist programme, delivering the learning outcomes of the RPS Post-registration foundation curriculum again provides early career pharmacists with an attractive pathway into advancing their practice.

These training programmes must be augmented with collaborative work between Higher Education Institutes in Wales, employers and HEIW to ensure attractive career options across pharmacy, in Wales, are promoted at an early stage to school leavers, aligning to the goals of Pharmacy: Delivering a Healthier Wales.

The promotion and articulation of the wider roles within pharmacy available to school leavers must be done at an early level, with school age children. Pharmacy technician roles have developed at pace and provide an attractive rewarding professional career opportunity for school leavers. Pharmacy provides school leavers with wide ranging and varied career opportunities, from undergraduate Masters degree level training for prospective pharmacists, to vocational level 4 training for pharmacy technicians, alongside further support staff roles as healthcare assistants.

Consideration needs to be given to the differences and equity of accessing training across pharmacy settings in the post registration space. For example, taking the credentialing pathway, the number of pharmacists employed in the hospital setting and accessing a credentialing pathway far outnumbers those employed in the community pharmacy sector.

There may be numerous factors for this which makes this pathway less attractive, including

- Education and training posts in secondary care settings to support workforce development, which may not necessarily be present in community pharmacy
- Access to supervisor and educational expertise, to observe practice and provide feedback is not always possible in community pharmacies.
- The vision and opportunities to follow a credentialing pathway are not as well articulated and defined in the community pharmacy space.

4. Technology in Education

What role should technology play in modern healthcare education?

Prompt questions:

- How can we leverage digital tools to enhance teaching while addressing concerns such as the digital divide (unequal access to digital technology) and screen time?
- What role could Artificial Intelligence (AI) play in educating and training the healthcare workforce?
- What could HEIW learn from other healthcare systems in technology enabled education and training?

Digital capabilities and Artificial Intelligence

The RPS has produced both a 'Digital Capabilities for the Pharmacy Workforce policy' and an 'Artificial Intelligence (AI) in pharmacy' policy.

Some specific asks from the digital policy include

- Digital capabilities should be stated explicitly in initial pharmacy education and training standards as well as the supporting curriculum documentation
- Schools of pharmacy must ensure that digital capabilities are embedded across the undergraduate pharmacy curriculum
- Employers and NHS pharmacy education commissioners must ensure advancement of digital capabilities is embedded into education, training and professional development at all career stages, including the development of clinical informatics roles

- NHS bodies must provide adequate resources, including funding, for the development of digital literacy and associated training for the current pharmacy workforce
- Digital capabilities for pharmacy teams should include an understanding of the opportunities, benefits and risks of artificial intelligence applications for pharmacy practice, and how these systems might enhance pharmacy services
- Before launching newly commissioned services involving the pharmacy workforce, the necessary digital capabilities must be assessed to ensure that the pharmacy staff are competent to deliver the service
- Pharmacists and pharmacy team members must have access to relevant technologies across health and care systems to provide high quality personalised care for patients

Our AI policy has some specific asks around education and training, these include

- Pharmacists must familiarise themselves with AI to ensure they have a level of awareness which allows them to contribute to the digital advancement of pharmacy practice
- Pharmacy professionals should have education and training on the benefits and risks of AI systems in pharmacy practice, and these must be introduced into undergraduate and foundation training programmes (investment required)
- The pharmacy workforce must be provided with the opportunities to develop the necessary skills and will require protected learning time to train and implement these new technologies

Continuous Professional Development

In terms of ongoing assurance and competency of professional practice and continuous professional development (CPD)

- E-portfolios provide the opportunity to support ongoing learning and development with an opportunity to reflect and highlight potential in skills and knowledge.
- AI has the potential to threaten and undermine more traditional methods of assurance in the form of recorded CPD. Observed advancing practice and development at the 'does' level, wherever possible, provides the opportunity for a more reliable demonstration of clinical practice.

Pharmacogenomics

The development and application of pharmacogenomics in clinical practice is an expanding area in healthcare which aligns with national and NHS priorities across Great Britain.

Pharmacy professionals are skilled at interpreting complex scientific data and use evidence-based medicine to support shared decision-making in their established patient-facing roles within the multidisciplinary team. With the increased demand for skills in this area pharmacists are well-placed to perform key roles related to genomic medicine by supporting patient understanding, maximising the benefits of precision medicine across the integrated care system, and to play a key role in genomics implementation in healthcare.

From system leadership to implementation of services, pharmacists can tailor and personalise the prescribing of medicines based on genetic information.

5. Supporting Educators

What support and training do healthcare educators* need to thrive in their roles?

Prompt questions:

- What are the current issues and challenges?

- How can we support educators at all levels (ie. from supporting those who need a basic education to formal educator roles)

As previously highlighted, healthcare environments must have embedded a culture of developing both self and others. This must be supported with adequate protected learning time, to allow time for self-development and create space and capacity for educational and supervisor activities.

For pharmacists currently upskilling and developing their prescribing practice, the challenge of access to a Designated Prescribing Practitioner (DPP) is a barrier our members consistently raise, especially within the community pharmacy setting.

Another barrier is the very real workforce pressures felt across the whole of the healthcare system. Results from the most recent [RPS workforce wellbeing survey](#) demonstrate the level of pressures and burnout felt within the workforce.

Any proposals need to be very mindful of these challenges and not further burden an already stretched workforce. Protected learning time across all settings and adequate job planning to ensure time dedicated for developing self and others remains a key enabler.