

Differential Attainment Oversight Group Meeting Notes

21st March 2025 – MS Teams

In attendance

Chair - Louise Brown, UCL	Neal Patel, RPS
Mahendra Patel, NHSE IPP	Kina Vyas, RPS
Ruth Edwards, Wolverhampton School of Pharmacy	Helen Boardman, Pharmacy Schools Council
Duncan Rudkin, GPhC	Richard Cattell, NHSE
Elen Jones, RPS	Diane Ashiru-Oredope, UKHSA, NHSE IPP
Dipa Patel, Kingston University	Fiona Woodley, NES
Abundance Temile, UKBPA	Aman Doll (AD), RPS
Roz Cheesman, NHSE WT&E	Beth Broad, HEIW
Siobhan McGuinness, GPhC	

Apologies

Emeka Onwudiwe, BPSA	Amy Laflin, APTUK
Debbie Nyaberi, Community Pharmacist	Paul Cummins, GPhC
Nicola Stockman, APTUK	Tase Oputu, RPS

Background to the Group

AD provided a background to the group, detailing how the group was formed and an update on the report published January 2024. Report link: <https://www.rpharms.com/recognition/all-our-campaigns/policy-a-z/differential-attainment>

A discussion around the key themes that impact Black student pharmacists and trainee pharmacists was had, highlighting areas which should be taken into consideration when looking at the causative factors to the degree awarding and differential attainment gap. These build on the factors highlighted in the report and include:

- **Access to resources:** having the networks and connections available to arrange work experience through familial connections, working in a pharmacy as a Saturday job, as well access to support and help when preparing application forms and interview preparation has an impact on the students progression and success.
- **Socioeconomic background:**
 - Some students may have family commitments or have to support themselves or their family financially throughout their university course. Therefore, their time will be spent having to work jobs which are not perhaps in a pharmacy.
 - Student who can afford to, are more likely to be able look for free work experience in pharmacies in their holidays and weekends, they will be able to bring this experience back into their pharmacy course and enhance their learning and education.
- **Difference in social capital:** there is a difference between student pharmacists who have prepared for interviews through the resources they have access to e.g. family and networks v's good students who do not have the same resources to prepare for interviews or would not know they would need to which will result in them not do as well. This directly impact their experience and opportunities available to them.

- **Cultural Awareness:**

- Consideration of additional responsibilities and financial commitments student pharmacists and pharmacist trainees may have for their families.
- There may also be a difference between family expectations and the individuals expectations. Particularly, if this is the first time someone from the family has attended university, there may be a difference in expectations between the family and student, these conversations can be difficult for the student or trainee to have with their family.
- In some cultures, people may be hesitant to access support, some cultures see asking for help as a weakness. Brighton Uni has done some work around this. <https://pharmacyeducation.fip.org/pharmacyeducation/article/view/1369/1362>
- There is a gap in student pharmacists and trainee pharmacists knowing how to access help and support. Nottingham University is doing some work to understand this.

- **Healthcare education and training tariffs:**

- Available for undergraduate clinical placements, provide an opportunity for all student pharmacists as they will have access to more placements at an undergraduate level across all Schools of Pharmacy. As these placements are facilitated by the schools, this will have a positive impact on access to experience across the board.
- Need to ensure there is a consistent positive experience, the quality of the placement is good and adequate for the student, this will be added to terms of reference as a part of the primary purpose of the oversight group
- There are current limitations to the healthcare education and training tariff, as it cannot be used for travel and accommodation, which will be a barrier for some student pharmacists.
- The group has a collective responsibility to hold people to account to improve this funding. Potential action for the oversight group, to consider advocating and lobbying Department of Health for access to the right funding for the right people for all students to flourish. Post Meeting Note – this has now been resolved in England

- **National Recruitment Scheme**

- Need to consider how the pharmacy National Recruitment Scheme – ORIEL has created a positive intervention for Black, Asian and Minority Ethnic Pharmacy trainees
- Research on ORIEL:
https://academic.oup.com/ijpp/article/31/6/638/7336817?utm_source=authortollfreelink&utm_campaign=ijpp&utm_medium=email&guestAccessKey=7a349377-8ba7-4ab1-89dc-f69b2e8ca027
- Could potentially include a measure to review the performance of Black student pharmacists v's other ethnicities in pharmacy National Recruitment Scheme - including performance of Situational Judgement Tests (SJT)s and numeracy tests

- **Student Pharmacist and Trainee Pharmacist experience**

- Need to understand the student pharmacist and trainee pharmacist experience from a holistic perspective, in addition to reviewing the quantitative data of achievement
- To collect the foundation trainee and student experience, an annual survey could be sent to student pharmacists and trainee pharmacists to collect longitudinal data on their experiences. Capturing how things are shifting or changing, asking the same questions each year.
- Need to also consider the networks and communities student pharmacists and trainee pharmacists have access to, having people with similar experiences does impact performance.
- There are some universities that don't have any or have very small numbers of Black student pharmacists, is this something for the group to consider exploring?

- **Teaching faculty diversity**

- Are student pharmacists being exposed to a diverse teaching faculty at an undergraduate level?
- They will be exposed to more diversity in the workplace in placements and foundation training placements with colleagues and patients
- Role models, it is important to highlight the need for more role models for student pharmacists, particularly who they're taught by.
- An opportunity to revisit and implement a diverse guest lecturer network, a database Schools of Pharmacy and foundation training providers could access if they would like to introduce more diversity into who is teaching their student pharmacists.
- Is there data available on the diversity of the pharmacy academic workforce? Will this be helpful in identifying gaps?

The oversight group needs to ensure all the points raised above are reflected in the terms of reference and will be researched and considered throughout the actions moving forward.

Overall discussion points

Throughout the meeting the following discussion points were raised:

- Why are we only focusing on the Black or Black British African student pharmacists and trainee pharmacists differential attainment and awarding gap?
 - The oversight group will be focusing on the degree awarding gap and differential attainment gap for Black or Black British African groups as this is where the data is currently reported.
 - There will be an intersectional view on all the actions and there is an appreciation that any action taken to positively impact Black or Black British African students and trainees will positively impact all groups.

- Pre-registration trainee pharmacy technicians (PTPT):

PTPT differential attainment will not be considered by this group as:

- As PTPTs are enrolled with a training provider and currently the GPhC do not maintain a list so no data held collectively for PTPTs at any point of their training journey to identify any trends.
- The capacity to make changes for PTPTs need to be with the relevant professional leadership body, the RPS is for pharmacists and APTUK would be expected to lead on this work.
- The working group will have some overlap; however the PTPT group will need to have different educators and learner experiences represented.
- There is a need to drive this forward, which the relevant organisations are exploring and are sighted on.
- The oversight group has a role to advocate and champion for PTPT data.
- With the PTPT Initial Education Training Standards (IETs) coming out for consultation in autumn, there is an opportunity to review how progression is measured and to challenge and hold the training providers to account on capturing the relevant data and how it is being used.
- **Action:** AD to talk to APTUK to how they can start some of this work, there will be some cross over from the groups, working alongside and sharing learnings across the two workstreams

- Terminology – are we using the right terminology?
 - The degree is awarded and there are opportunities for introducing bias when marking exams and coursework
 - The registration assessment mark is attained as there are no individuals involved in marking the assessment and therefore minimal opportunity to introduce bias
 - The group decided to keep the terminology as it is for now
- Ways of working:

Each of the oversight group members will be chairing or co-chairing a task and finish group leading on implementing the key actions highlighted in the report. These are:

1. Data
2. Inspiration, aspiration and role models
3. Tutor Training
4. Supporting the transition of pharmacy students to foundation trainees

Action: Ahead of the next meeting, there is a need to consider the wider membership for each of the task and finish groups. Ensuring there are frontline pharmacists, employers and schools of pharmacy representation in each one.

A large cohort of Black pharmacist trainees undertake their training in community pharmacy and will be accessing the private training providers. Therefore, the training providers will have experience of engaging with trainees. Their experience will be valuable for the task and finish groups.

Need to ensure there is a strong learner voice throughout all the task and finish groups, it is also important to ensure there is representation from different year groups to capture different experiences and expectations.

Guest speakers with experience in differential attainment from other healthcare groups will be invited to these meetings to share best practice.