Annual Submission and Review Model for The Faculty

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Based on research conducted from August 2018-January 2019

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Executive Summary

Background

The RPS have set up a number of professional development programmes to support the development of a competent, flexible workforce. The Faculty was launched in June 2013; a professional development programme for advanced pharmacy practice. It was established as a professional development and recognition programme for pharmacists across Great Britain, regardless of sector, to enable individuals to demonstrate and showcase advanced practice knowledge, skills, behaviours, and experience[1].

The Faculty was designed to support the development of pharmacist and pharmaceutical scientist members of the RPS who have completed a minimum of two years post registration experience, once early or foundation years have been completed. It is an opportunity for pharmacists and pharmaceutical scientists working in any sector or setting to demonstrate a breadth of advanced practice against the Advanced Pharmacy Framework (APF). Members are assessed through a peer review process against the 6 clusters:

- Expert Professional Practice,
- Collaborative Working Relationships,
- Leadership,
- Management,
- Education, Development and Training,
- Research and Evaluation

Driver for Review

There were several drivers for reviewing The Faculty:

- A need to clarify what the resubmission model is, as the first cohort of the Faculty are now due to resubmit.
- The numbers of pharmacists and pharmaceutical scientists completing the Faculty has been lower than expected with less than 2% of the current RPS membership recognised across the 3 levels of advanced practice since its launch in 2013.
- The recent introduction of General Pharmaceutical Councils (GPhC) Revalidation for Pharmacists and Pharmacy Technicians,
- Member insight into barriers to the Faculty including cost and the process

With the combination of the above, the RPS felt it was a good time to reflect on members' experience of the Faculty and consider a resubmission model potentially aligned to revalidation.

Aims and Outputs

Aims

The primary aim of the review is to:

- Scope if an annual resubmission model aligned with revalidation was supported by Faculty members and Fellows.
- Consider how an annual resubmission model would be operationalised, taking into consideration whether revalidation should or could be aligned to the Faculty to avoid duplication of effort.

Outputs

- Review the resubmission model; to maintain the previously achieved level or if the Faculty member is aiming to advance their staging.
- To make recommendations on an annual model for maintenance of the Faculty status
- To update and align the Faculty submission process with GPhC revalidation.

Method

Faculty members and Fellows and a selection of RPS members were invited to participate in this review. 77 participants were interviewed via focus groups and one to one structured interviews, both face to face and virtually via webinars. 67 participants were Faculty members and 10 participants were Faculty builders and were yet to submit their portfolio for assessment.

To ensure we recommend an annual model that is accessible and demonstrates the members breadth of experience and to address the issues that have been identified, key themes were identified. Questions were structured around these to ensure rich qualitative data was collected.

The themes were:

- Motivating factors and engagement with the Faculty
- Members experience of completing the elements of the Faculty Assessment
- Experience of building the Advanced Practice Portfolio (APP)

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- Online e-portfolio
- Submitting the portfolio for assessment
- The Faculty assessment report
- The Faculty Staging
- Cost of assessment and maintenance fees
- Impact of the Faculty on members practice
- Views on a proposed annual model

Results and Recommendations

The 77 participants interviewed were from a range of sectors with different levels of experience. Participants identified their primary sector of practice as follows: 60% hospital, 10% Community, 14% Academia, 4% Primary Care, 1% Industry and 9% other. The majority of participants were Faculty fellows from the first wave of Faculty members and Fellows.

Data from the focus groups was categorised and is shown in Table 1.

Table 1: Results and Recommendations from the Faculty focus groups

Purpose	The purpose of the Faculty needs clarity	There is strong support for the principles of the Faculty. For some it has had a positive impact on their professional development.	Participants value the peer reviewed assessment process as it provides assurance of working at an advanced level from within the profession.	
Process	The process needs a review to be accessible and easier to complete.	There were mixed opinions amongst the participants whether	An annual resubmission model is preferred to a 5 year resubmission	The online platform needs to be improved

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		resubmission is necessary, if the member would like to maintain their awarded staging especially with Mastery.	model. It needs to be aligned with GPhC Revalidation.	
Assessment	The assessment needs more transparency; members are unclear of what is assessed.	More support is needed in preparing for submission of the portfolio. This includes streamlining the resources and a formative assessment prior to submission.		
Marketing	An improved communication and marketing strategy to embed the APF early into the pharmacists and pharmaceutical	The funding model needs to be reviewed; there is a need to consider the value proposition and what	A marketing strategy to increase recognition of the Faculty by employers and other healthcare professionals.	

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	scientists careers as a self development tool.	members would deem to be of value when contemplating their membership.			

In conclusion a number of issues have been identified with the current Faculty service which need to be considered and resolved in order to make recommendations on an annual resubmission process aligned to revalidation.

The recommendations that have been made will need to be considered over the short, medium and long term and be considered by the RPS internal governance structures as appropriate before they are operationalised.
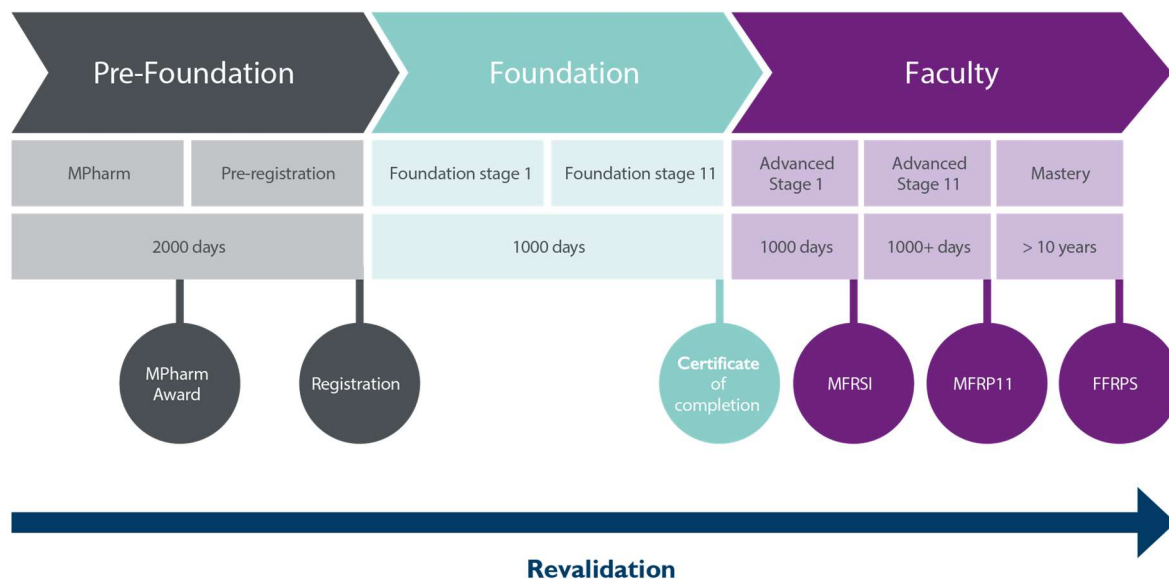
Introduction

Background

The RPS have set up a number of professional development programmes to support the development of a competent, flexible workforce. The Faculty was launched in June 2013; as a professional development programme for advanced pharmacy practice. It was set out to be a recognition programme for pharmacists and pharmaceutical scientists across Great Britain, regardless of sector, to enable individuals to demonstrate and showcase advanced practice knowledge, skills, behaviours, and experience[1].

The Faculty was designed to support the development of pharmacists and pharmaceutical scientists' members of the RPS who have completed a minimum of two years post registration experience, once early or foundation years had been completed. It was an opportunity for pharmacists and pharmaceutical scientists to map their development against a framework for advanced practice and assessed through a peer reviewed process

The RPS set out a Professional Development Roadmap as shown in Figure 1 as professional practice is believed to be a continuous journey where the pharmacist moves from registration through to advanced practice through experience, acquiring knowledge, skills and behaviours.

Figure 1: RPS Professional Development Roadmap

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Pre-Foundation		Foundation		Faculty		
MPharm	Pre-registration	Foundation stage 1	Foundation stage 11	Advanced Stage 1	Advanced Stage 11	Mastery
2000 days		1000 days		1000 days	1000+ days	> 10 years
MPharm Award	Registration		Certificate of completion	MFRSI	MFRP11	FFRPS

Revalidation

The main purpose of the Faculty was considered to:

- Lead the establishment of standards for post-registration education
- Provide provision of a professional, structured, pathway for individuals' career development for both advanced generalists and specialists
- Recognise the achievement of pharmacists and pharmaceutical scientists, giving them a way of demonstrating their level of professional advancement to fellow health professionals and the general public

The Faculty enables pharmacists and pharmaceutical scientists to demonstrate advanced knowledge, skills and behaviours across all sectors and settings, so that they are better equipped to deliver an advanced level of pharmaceutical care in a rapidly evolving and increasingly complex healthcare environment, through the use of:

i. RPS Advanced Pharmacy Framework (APF)[2]
ii. Knowledge Interface Tool (to identify core and specialist advanced stage knowledge items)
iii. Advanced practice e-portfolio (APP) and a suite of assessment tools
iv. RPS resources, support and guidance
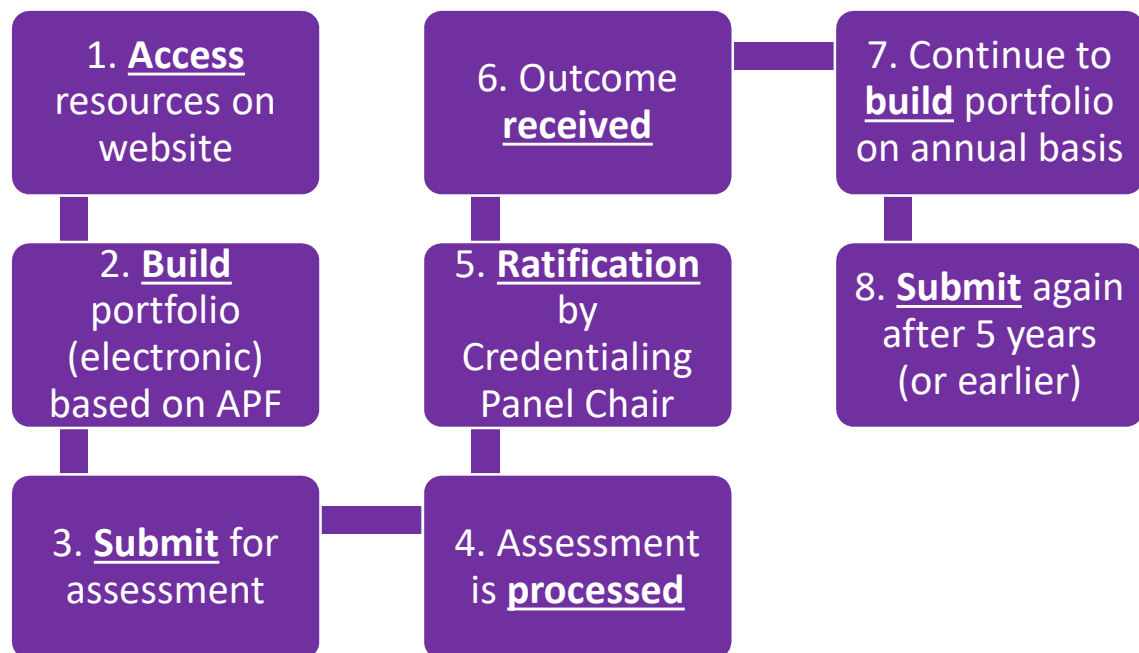v. RPS networks and mentors

Pharmacists and pharmaceutical scientists are assessed against the APF demonstrating a breadth of advanced practice against the 6 clusters:

1. Expert Professional Practice,
2. Collaborative Working Relationships,

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3. Leadership,
4. Management,
5. Education, Development and Training,
6. Research and Evaluation.

Figure 2 demonstrates the Faculty process – from access to the portfolio and resources, through to submission. It also demonstrates the proposed resubmission model for maintenance of post-nominals or advancing through the APF.

Figure 2: Process of initial submission and resubmission

1. **Access** resources on website	6. Outcome **received**	7. Continue to **build** portfolio on annual basis
2. **Build** portfolio (electronic) based on APF	5. **Ratification** by Credentialing Panel Chair	8. **Submit** again after 5 years (or earlier)
3. **Submit** for assessment	4. Assessment is **processed**	

There are four different types of evidence that are submitted for the Faculty assessment, which demonstrate the members breadth of experience of advanced practice. Figure 3 outlines these elements.

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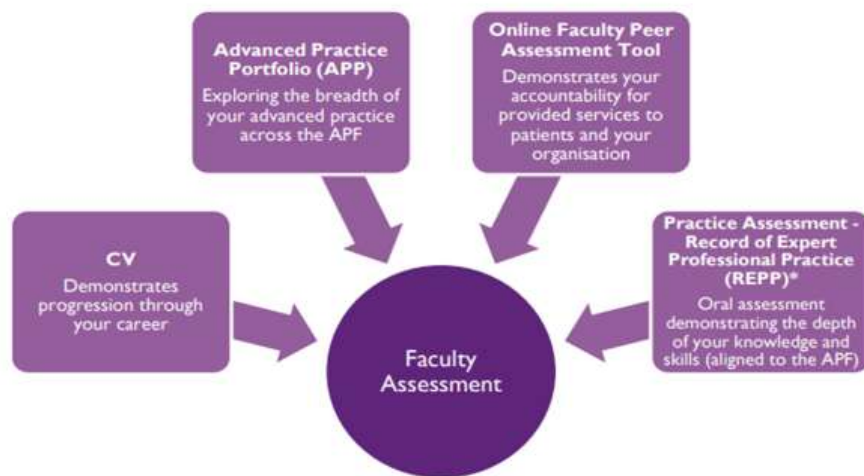Figure 3: The Four Elements of the Faculty Assessment

Figure 2: The Four Elements of the Faculty Assessment.
*If you are more than 10 years registered and are submitting your portfolio for the first time you can submit via Recognition of Prior Experience (RPE)

- **Curriculum Vitae (CV):** this demonstrates the members progression through their career and enables the assessor to triangulate the advanced practice portfolio, peer assessments tool with the CV.

- **Advanced Practice Portfolio (APP):** this is the largest part of the assessment; this is built up by the individual demonstrating their experience and impact mapped to the clusters in the APF. The aim is to explore the members breadth of advanced practice across the APF, this is done by collating the evidence describing the event or activity they had completed, what skills, knowledge, attitudes and behaviours they have learnt and how this has benefitted their service users. The entry is then mapped to one or more clusters of the APF and the individual is asked to self-assess their stage. They are then expected to complete an impact statement where they describe the impact this work has had on their practice.

- **The Online Faculty Peer Assessment Tool (PAT)**: multisource feedback is obtained from peers and patients nominated by the applicant. This demonstrates their accountability for provided services to patients and their organisations.

- **Record of Expert Professional Practice (REPP):** This element is to provide depth and validation of the applicants expert practice. Applicants are required to complete a minimum of two work-based assessments (WBA) with a specialist in their expert field. They are then required to undertake a professional discussion of these cases with a REPP assessor, a Faculty

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member who has completed the required training. This element is not required to be completed by applicants who are more than 10 years qualified and submitting for the first time.

The advanced practice portfolio is assessed by two assessors - Faculty members or Fellows who meet the required criteria and have completed assessor training. The members would be awarded one of three stages:

- **Advanced Stage One:** members, usually in their second 1000 days of practice, or established members returning to work after a career break or changing their scope or sector of practice, who have either completed Foundation Training or demonstrated competency at Foundation level.

- **Advanced Stage Two:** members who are established in their careers or aiming to achieve excellence in their roles, beyond their second 1,000 days

- **Advanced Stage Three (Mastery):** members who are practising at an exceptional level, in highly complex environments and in very senior roles in the profession locally, regionally and nationally

There is an assessment fee of £300; paid upon submission for review. Once the post-nominals have been awarded there is a maintenance fee of £50, £75 or £100 based on the awarded stage of practice.

Drivers for Review

There are several drivers for reviewing the Faculty:

1. Firstly, a consideration and clarity of what the resubmission model will be, as the first cohort of Faculty members and Fellows are now due to resubmit.
2. The Faculty was launched 5 years ago, and the number of pharmacists and pharmaceutical scientists completing the Faculty has been lower than expected. Less than 2% of the current RPS membership has been recognised across the 3 levels of advanced practice since 2013.
3. The recent introduction of General Pharmaceutical Councils (GPhC) Revalidation for Pharmacists and Pharmacy Technicians.
4. Anecdotal insight from members has revealed that:
   - Even though members understand the reason for assessment fees the amount is considered a barrier to submission as they may struggle to find the money.

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- Members do not see the value of a top-up fee
- There is a concern about resubmitting a full portfolio – it is considered a barrier to maintaining their membership
- With resubmission there is a risk of losing their current Faculty status. They should be allowed to maintain their initial awarded post nominals unless they are attempting to move up.

With the above combination, the RPS felt it was a good time to reflect on members' experience of the current Faculty model and consider if the Faculty could align with the new GPhC Revalidation requirements.

Aim and Outputs

Aims

The aim of the review is to:

- Scope if an annual resubmission model aligned with GPhC Revalidation is supported by Faculty members and Fellows.
- Consider how an annual resubmission model would be operationalised, taking into consideration whether GPhC Revalidation should or could be aligned to the Faculty to avoid duplication of effort. With the intention to submit the same evidence to maintain both the Faculty and revalidation.

The aim of the review was to draw on Faculty members and Fellows' experience of their initial submission, how motivated they felt about resubmitting their portfolio and if an annual model would demonstrate their advanced skills, therefore our research was primarily conducted with existing members and Fellows of Faculty, as opposed to the wider profession.

Please note the initial submission process was out of scope.

Outputs

- Review the resubmission model; to maintain the previously achieved level or if the Faculty member is aiming to advance their staging.
- To make recommendations on an annual model for maintenance of the Faculty status

To update and align the Faculty submission process with GPhC revalidation.

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Method

The Faculty submissions are categorised by the year of submission; we have had 6 cohorts since the launch of the Faculty. The first cohort of Faculty members and Fellows were submission by invite only, predominately senior pharmacists and pharmaceutical scientists across different areas of practice of pharmacy. This was intentional, so that this cohort could go on to act as assessors for future cohorts. From the second cohort onwards, the Faculty submissions were open to all RPS members who were more than 10 years post registration. From 2016, this was extended to RPS members who were more than 2 years post registration.

To ensure all levels of pharmacy experience were captured in this review, Faculty members from each cohort and awarded different stages were actively approached to seek views on their experience of the current Faculty model; including all aspects and elements of the Faculty journey to support with recommendations for an annual model aligned with GPhC revalidation.

A phased approach was taken to ensure all cohorts were approached in a timely manner; the first cohort was approached first, followed by the subsequent cohorts.

Data Collection

Data was collected through a combination of focus groups both face to face and virtually via webinar. Structured interviews on a one to one basis were conducted if individuals were unable to attend the focus groups.
Faculty members and Fellows were contacted directly. We recruited participants who had not completed their Faculty journey via the RPS Development newsletter which was sent monthly to all RPS members.

All participants were sent an information sheet to outline the purpose of the focus groups and the key themes that would be covered (Appendix 1). A consent form was sent out to gain their permission to record the focus groups and calls (Appendix 2).

Key themes were identified to ensure the correct qualitative data; to ensure we recommend an annual model that is accessible and still able to demonstrate the

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breadth of experience and to address the issues that have been identified with the current Faculty model. As the numbers for the Faculty were lower than anticipated we would like to explore what professional development service would maintain retention and increase membership by reviewing the experience of different parts of the Faculty journey.

We were aware of anecdotal feedback from RPS members regarding barriers to commencing and completing their Faculty journey. We wanted more details to identify the problems with the process or principals of the Faculty to ascertain if they could be addressed when proposing the annual model. The themes and questions need to be able to draw out information from the members experience of completing the Faculty. Drawing out what motivated members to start their Faculty and what is continuing to motivate them to maintain their membership and resubmit. What impact the Faculty has had on their professional practice or additional benefits from completing. Their experience of collating their portfolio of assessments and; what the individual gained from completing the different elements. What support or resources they found valuable and what additional support they feel is required to submit their portfolio. Their views on their feedback; how it helped them in their practice and how it could be improved.

Principles of a proposed annual model would need to be tested to see participants views and what considerations would need to be made when operationalising it. The costing model would also need to be discussed.

To support this the following themes were identified for the focus groups:
- Motivating factors and engagement with the Faculty:
  - What motivated individuals to access the Faculty and maintain motivation through to submitting their portfolio;
  - The barriers and enablers to the Faculty submission;
  - Motivations to resubmit the Faculty portfolio.

- Members experience of completing the elements of the Faculty Assessment:
  - What did the individual gain from completing the different elements of assessments that make up the Faculty portfolio?

- Experience of building the Advanced Practice Portfolio (APP)

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- What was the individuals experience of building the APP;
- How did they find coming up with evidence, mapping the evidence across to each of the clusters and their views on the impact statement.

- Online Portfolio
    - Experience of using the e-portfolio and what can be improved about the platform

- Submitting the portfolio for assessment
    - Was the individual prepared and ready to submit their portfolio?
    - Did the RPS do enough to support them through to submission?

- The Faculty assessment report
    - How helpful was the feedback and how could it be improved?

- The Faculty Staging
    - Views on the stages in the Advanced Pharmacy Framework

- Cost of assessment and maintenance fees
    - Views on both the assessment and maintenance fees

- Impact of the Faculty on members practice
    - What impact has the Faculty had on the individual's practice?

- Views on a proposed annual model
    - Should there be an annual submission process?
    - Should it be aligned to GPhC revalidation?

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Results

Participant demographic data

77 pharmacists participated through focus groups; one to one semi structured interviews and a targeted focus group held at the consultant pharmacist meeting. We asked for participants from all three countries. 67 participants have completed their Faculty journey and 10 are considered the Faculty Builders as they had started their Faculty journey but were yet to complete it. Figure 4 indicates the geographical spread of Faculty members and Fellows, this is proportional to the number of Faculty members and Fellows in each country.
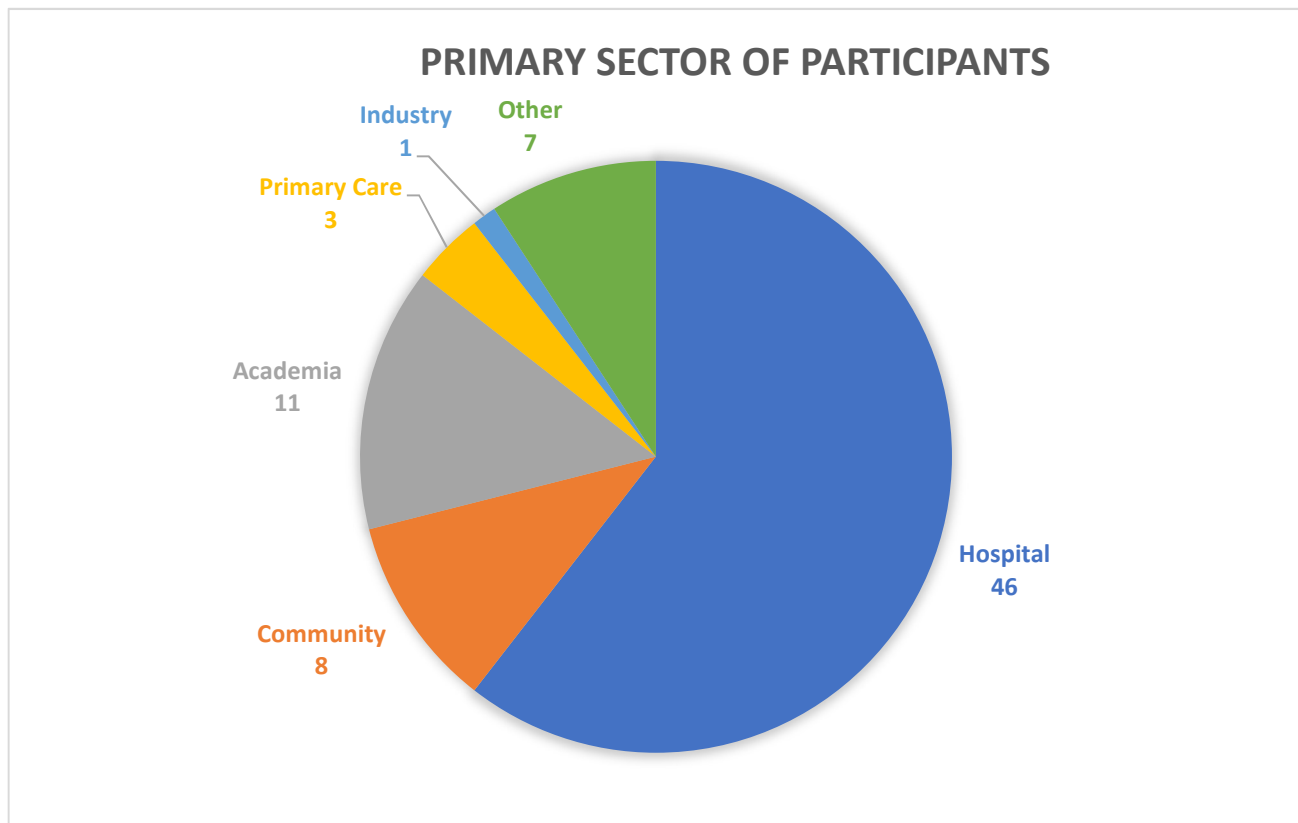
Figure 4: Geographical spread and number of participants

Participants of the Faculty resubmission review were recruited from a variety of practice areas as indicated by Figure 5. The majority of the participants identify the hospital sector as their primary area of practice. This is reflective of the Faculty
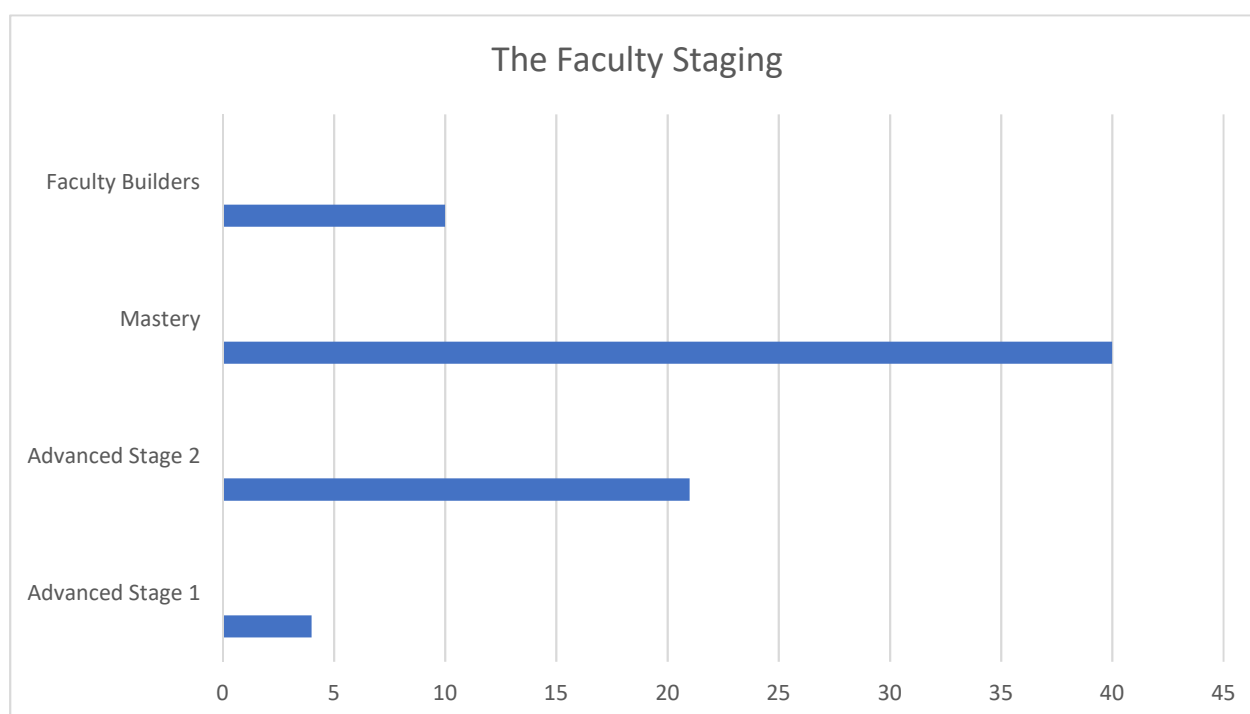
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membership as the largest number of members (51%) are from the hospital practice area.

Figure 5: Primary sector of the Faculty review participants

PRIMARY SECTOR OF PARTICIPANTS

Industry 1
Other 7
Primary Care 3
Academia 11
Hospital 46
Community 8

The majority of participants within the review have been awarded a Mastery staging (figure 6); a larger proportion of the participants for the review were from the first Faculty cohort. These members were invited to submit the Faculty portfolio as they were considered experts in their areas of practice and therefore awarded Mastery. In practice the number of Faculty members and Fellows awarded Mastery and Advanced Stage 2 are very similar. Advanced Stage 1 make up the smallest proportion of our current Faculty members (12%).

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Figure 6: Awarded the Faculty staging of focus group participant

The Faculty Staging

Please note the Faculty Builders are individuals who are using the portfolio but have not yet submitted and therefore not been awarded a stage

Themes

The results below are the views, thoughts and perceptions on the Faculty from the focus groups which were held across England, Scotland and Wales. From the questions asked to the participants the following data has been collected. The questions asked in the focus groups can be found in appendix 3.

1. Motivating factors and engagement with the Faculty
2. Members experience of completing the elements of the Faculty Assessment:
3. Experience of building the portfolio
4. Online e-portfolio
5. Submitting the portfolio for assessment
6. The Faculty assessment report
7. The Faculty Staging
8. Cost of assessment and maintenance fees
9. Impact of the Faculty on members practice
10. Views on a proposed annual model

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1. Motivating factors and engagement with the Faculty

Participants were asked what motivated them to submit their initial submission and if they were motivated to re-submit to maintain their post-nominals or advance to the next stage as appropriate. This also drew out what they considered to be the current and future enablers and barriers to individuals submitting the Faculty.

a. Initial Submission

The motivations for individuals undergoing and completing the Faculty varies depending on which stage of their career they are in. Pharmacists who have been qualified longer and are more experienced view the Faculty as a process to recognise their achievements in their career in comparison to pharmacists earlier on their career, they used the Faculty as a self- development tool. The assessment provided assurance of their current practice and aspirations of where they would like to be.

The first cohort of Faculty members and Fellows are predominately experienced pharmacists who have been qualified for a number of years and have successfully achieved Mastery through the Faculty; at the time the Faculty was launched it was considered a novel and innovative service. These individuals felt the Faculty was the only process available for the profession that would recognise their breadth of experience and endorse them as leaders and experts in their practice area.

For pharmacists across all stages of their career the Faculty was considered a 'stamp of approval'; demonstrating they are working at an advanced level. As the Faculty portfolio is assessed by other pharmacists there is recognition from within the profession as it is a peer reviewed assessment.
Undertaking a peer review assessment of their portfolio and completing the Faculty; they would be considered role models for the profession and their staff; especially as they were encouraging their staff to also undertake the Faculty.

Even though the GPhC had a mandated CPD process in place, participants felt the Faculty demonstrated the individual's impact on practice at a higher level that was

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required from the GPhC's mandatory CPD and was therefore considered a suitable alternative until a formal revalidation process was in place.

All the participants considered the Faculty to be a quality assurance process which provides credibility for the patients and other healthcare professionals.

A number of participants practiced in a variety of roles and possessed a breadth of experience across their career. The Faculty was therefore considered a good tool to bring all their experience together into one place and being awarded a staging for what had been achieved.

Participants earlier on their careers thought that the Faculty was a good way to demonstrate achievements, by recognising previous practice and highlight areas of development that maybe required when changing from one sector to another. One participant used their Faculty submission as an alternative to a diploma.

A participant who works as an education specialist (not working in academia); completed the Faculty because it could be used as a programme recognising advanced practice in a non-clinical area; this is the only development programme available within Pharmacy to allow for this. Another participant who works on a consultancy type basis felt completing the Faculty and having the postnominals gave her credibility with her clients.

Members of the national RPS Consultant Pharmacist Group all indicated they completed or working on mapping their development to the Advanced Pharmacy Framework (APF) resulting in the Faculty submission as it was a requirement for the consultant pharmacist posts as outlined in the 'Guidance for the Development of Consultant Pharmacist Posts[3]'.

It is important to highlight that most Faculty members and Fellows are not driven by having post nominals or recognition but by wanting to be role models. There is a difference between recognition of professional achievements and post-nominals which needs to be considered.

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b. Resubmission

There were mixed views with resubmitting the Faculty. Some participants are happy to resubmit with the current model as they have been building their portfolio and anticipating advancing to a higher stage. Additionally, they wanted to keep hold of their post nominals as they felt they had worked hard for them with the initial submission. They thought 5 years was a good time span to cover the 36 competencies within the six clusters. Additionally, the initial motivating factor of being a role model is driving them to maintain their Faculty.

Some members are supportive of resubmitting their portfolio as there is a need to demonstrate that you are maintaining and continually developing regardless of the stage awarded. However, the barrier to resubmission is a lack of clarity of what needs to be submitted the second time round.

Some participants have stated they have no strong feelings about the resubmission model as they would resubmit what is expected as they would not have questioned what is required.

Many participants felt the initial submission was a lot of work and time consuming and did not feel it added to their career development. There is a concern the resubmission model would be the same; a duplication of effort every 5 years. This is putting participants off from resubmitting, they would not consider the time to complete the Faculty again, would be a good use of their time as they don't feel they have benefited from completing the process the first-time round.

There have been questions about the need for a resubmission model, what value does it offer submitting something every 5 years? The duration of submitting something every five 5 years was questioned. Where did this time frame come from? Should it be more or less?

There are some members who support a resubmission, if the Faculty member is aspiring to move up a stage. However, they were not supportive of having to resubmit as they don't see the value in demonstrating continued maintenance once

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Mastery has been achieved; there is a view that once you have reached Mastery you are not going to lose that skill.

Other reasons for participants not motivated to resubmit included:

- The purpose of the Faculty was not clear for some; they do not feel it has contributed to their career progression or practice and are therefore questioning the value and need to resubmit.

- There was a perception that a full portfolio is needed to be resubmitted if the awarded stage was wanting to be maintained. It was understood that a resubmission would need evidence to demonstrate all six clusters at the Mastery stage, resulting in concerns about not being awarded the same level. As roles or the breadth of work the individual was now doing may have changed and they would be unable to demonstrate the skills required. Additionally, the initial submission had a larger time frame to select evidence from, which demonstrates skills and competencies. For the resubmission it was felt that, there was five years to reflect on evidences to cover the breadth of all six clusters which may not be a long enough timeframe.

- There was also a concern from participants aspiring to move up a stage that five years would not be enough to be exposed to all the experience necessary to confidently apply for a higher staging. They would rather hold off and lose their post nominals until they are confident their portfolio demonstrates their skills to a further advanced stage.

- For those close to retirement; there was a question of what the resubmission model looked like for retired pharmacists. They were keen to keep their post nominals as they had retired from the register but not from the profession. They would not be able to demonstrate all the clusters, but will they be able to retain their awarded stage of Mastery as recognition of what they have achieved through their career and the impact on the profession?

- The Faculty assessment fee and maintenance fees were considered expensive, to resubmit and pay another assessment fee and to continue to pay yearly for something they do not feel they have received any benefit from or see any communication from the RPS regarding the Faculty the value was questioned.

- From the assessor's point of view there would only be value in assessing a resubmission if there is access to the members previous submission to see if

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progress has been made. The current proposed resubmission model does not take into the account previous submissions.

- The value of the Faculty was raised as other healthcare professionals do not recognise it; what would be the value of resubmitting.

c. Enablers and Barriers to the Faculty submission

i.   Enablers

Current Enablers

- The Faculty is a programme which allows recognition of experience and achievements across all areas of practice.
- The APF can be used for more specific Personal Development Plans (PDP) within the workplace to set meaningful objectives. This is especially helpful if the individuals line manager is not a pharmacist.
- It is a good way of bringing together diverse roles an individual has undertaken and obtaining recognition of what they have achieved.
- Collating the advanced practice portfolio mapped to the APF is a good reflective tool to highlight achievements and gaps in practice.
- A tool of recognising advanced practice in both clinical and non-clinical roles
- Two organisations have encouraged staff to complete the Faculty by putting it as a development milestone in their personal development plans and have paid for the assessment fees.

ii.   Future Enablers

- A peer network of individuals undertaking their Faculty journey would support and motivate individuals to submit their portfolio as they would have other individuals to talk to and bounce ideas off. Talking through their experience in relation to the APF with others has helped generate ideas for evidence especially for the clusters where they are struggling to think of examples.
- A network of Faculty members and Fellows (the Faculty Alumni): a group of individuals who have completed their Faculty could be accessed as a resource by individuals building their Faculty portfolio. This could also support individuals with projects they are involved with which they may require specific expertise on. Additionally, it may also provide an opportunity for both Faculty members and builders looking to advance through the APF to take on an opportunity that may give them wider exposure such as contributing to a national or regional project. This could also support them with finding a mentor working in a similar area to them at a more advanced level.
- Faculty members and Fellows could be utilised by the RPS more; they could be asked to present at conferences on behalf of the RPS in their speciality areas. Providing informal recognition.

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- There is a potential to work with affiliated partners and specialist groups to support the clinical specialist elements of advanced practice as some feel the Faculty demonstrates generalist competencies.
- Made essential and mandated by employers for career progression; such as becoming a Consultant Pharmacist.
- Employers being equally supportive of individuals undergoing the Faculty as other taught courses; such as supporting staff to complete the Faculty in their work day (study time) or contributing to the assessment fees.
- Dual recognition of other training pathways such as the Postgraduate Clinical Diploma, Non-medical prescribing courses, College of Mental Health Pharmacist (CHMP) or other advanced training pathways both clinical and non- clinical.
- Deadlines to submit the Faculty; the initial cohorts had deadlines which gave individuals a date to work towards. This was removed following feedback from members who found the deadline too stressful. However, having biannual submissions may support members to set themselves a goal date to submit by. There could be an intention to submit sent to the RPS. This will also support the workload from as assessors point of view as they would be able to know when they would need to set time aside for assessing portfolios. Similar to the RPS Fellows scheme.
- Marketing and promotion of the Faculty and its benefits; more effort should be made advertising the Faculty and using local champions to promote its benefits.
- Communication from the RPS; once individuals have started their journey, they should be contacted by the RPS to let members know what support is available to them and to send reminders to keep them motivated with the Faculty especially if there has been a period of inactivity.
- The Faculty needs to be introduced into pharmacists' professional development earlier in their career for it to become part of the culture of professional development. It should it be considered a repository portfolio where individuals enter their evidence throughout their career using the APF as a self- developmental tool and submitting the portfolio when the individual is ready.
- It could be used by employers in their annual appraisal processes to support objective setting and achieving milestones once Foundation has been completed and individuals are looking for advanced roles.
- To reduce duplication, if the Faculty is aligned to GPhC Revalidation there should be an ability to submit the Faculty entries from the RPS e-portfolio to the GPhC in one click.
- Streamlining the Faculty resources and making it easier to navigate through both the resources and online portfolio.
- As the Faculty is considered to be time consuming and hard work, members feel the RPS should celebrate individuals completing and achieving the Faculty. This may attract additional RPS members to join as they would feel they have achieved a milestone.

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- Recognition of the post nominals from within the pharmacy profession and other healthcare professionals. An observation by several participants was the RPS does not use the post-nominals to differentiate between Faculty members and Fellows from non- Faculty members on correspondence or events lists.
- There is potential to use the Faculty to support the recruitment process; the Faculty provides an in-depth portfolio of the individuals achievements as they are able to demonstrate examples of their practice and the impact this has had on both on their practice and their service users.
- A financial incentive such as reduced RPS membership fees for completing the Faculty.
- Access to the Faculty to non- RPS members

iii.   Barriers

- Time consuming: members spend a variety of time completing their portfolio ranging from a week (using annual leave) to up to 2 years depending on their motivation and personal circumstances. The RPS suggested an 8-week plan to complete the Faculty. However, this was considered misleading as it took more time than that.
- A lack of recognition of the Faculty and the post-nominals from both within the profession and other healthcare professionals. Participants don't believe completing the Faculty is considered time well spent as it is time consuming to complete and then not recognised.
- Cost: most of the participants interviewed understand the need for the assessment fees, however they felt the assessment and maintenance fees are expensive as they cannot see the return on investment for their Faculty membership.
- The Faculty does not recognise other training and development pathways and was considered an additional thing to complete.
- Employers do not mandate individuals to complete the Faculty for their career progression; it was not put in job descriptions as desirable or essential therefore motivation for RPS members to complete their Faculty was low.
- Participants who had completed the Faculty said employers did not recognise it as an achievement unless they had completed it themselves. Non- Faculty members were not aware of how much work the Faculty entailed. As a result, there was a lack of support (such as study time) from employers and teams and Faculty members were expected to complete it in their own time. As the Faculty was not valued as an achievement it was overlooked in the recruitment process.
- Currently the Faculty is not aligned to GPhC Revalidation; participants felt as revalidation is a mandatory requirement to be registered, individuals may not undertake or renew their Faculty as they will be able to demonstrate continual professional development through GPhC Revalidation at no extra cost then the registration fee.

- There is minimal recognition of the Faculty within the pharmacy profession and no recognition or understanding of the post-nominals by other healthcare professionals. Recognition of the post-nominals was important to participants especially if they were working at an advanced or consultant level to differentiate their knowledge and experience and to be seen as a valuable member of the multi-professional team.
- When members sign up to the Faculty it was perceived to be overwhelming, it was unclear where to start; this had put individuals off starting their portfolio. They found it difficult to know what type of evidences they could use for the APF, more support maybe required to help members start their journey. There are several resources which need to be aligned and made easier to navigate through.
- There was a perception amongst members that working in particular areas of practice (e.g. community pharmacy) or undertaking particular roles achieving Mastery would not be possible.
- Resubmitting the Faculty every five years was considered a barrier, if it was a one-off process or aligned to revalidation with an annual submission model it would be considered more attractive to undertake.
- A requirement to be an RPS member to undertake the Faculty; individuals not supportive of the RPS would not undertake an RPS development programme. They may also discourage their staff too.
- RPS members need a reason to motive them to complete the Faculty which is clearly articulated to them and one that they can relate to.

a. *Participants experience of completing the elements of the Faculty assessments*

Participants were asked about their experience of undertaking the different elements that are required to make up the Faculty submission. What they felt they gained from each element and what they thought it added to the process.

a. Curriculum Vitae (CV)

Most participants didn't feel they gained anything from completing a CV for the Faculty; there was an appreciation it was more of a tool for the assessors as it put the member into perspective and provided the assessor with context. They can triangulate the advanced practice portfolio and Peer Assessment Tool (PAT) with the CV and gain a fuller understanding of the individuals experience and the evidence they have provided.

For some participants it was the first time they had completed a CV, as while working in secondary care a CV was not required for the recruitment process. Therefore, it would be helpful to have a template CV to indicate how much information is required.

b. Advanced Practice Portfolio (APP)

On the whole participants found collating a portfolio of evidence mapped to the APF helpful; for most it was the first time they had taken the opportunity to look back at their career and reflect on what they had achieved and the level they are working at. However, a concern was raised about written evidence; writing a piece of evidence well, did not mean you were a good pharmacist working at an advanced level. What was the quality assurance process as individuals may exaggerate their role?

It provided a positive feel good factor to dedicate time to go through the different roles that had been undertaken; the different projects completed and the different skills they had developed over the last 5 – 10 years. Going through the process provided confidence and reassurance that they were working at an advanced level and they had evidence to demonstrate this in different clusters.

Having the APF provided a structure, allowing a methodical process and a focus for thinking about evidences for particular skills and knowledge; it allowed participants to breakdown the portfolio into manageable parts. Some participants had started by writing down all their achievements and found that it was quite overwhelming as they were unsure which clusters the evidence fit into.

However, for some participants the APF was difficult to understand initially; the descriptors were described as abstract and it wasn't always clear how their practice related to them and how they were demonstrating them.

Going through the experience of building the portfolio, helped identify which clusters and competencies required development and encouraged individuals to be more mindful of their development areas when putting themselves forward for projects.

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Some participants felt that it could be difficult to demonstrate working at a particular advanced stage across all six clusters as their role may allow them to work at a higher advanced level across some of the clusters than others, depending on their role. For instance, individuals working in secondary care in a specialist area will be able to demonstrate Expert Professional Practice and Education and Training at a Mastery level but may not have the opportunity to undertake Research and Evaluation at the same level.

It was highlighted several times the collation of the advanced practice portfolio could potentially be easier for hospital pharmacists compared to their colleagues working in the community sector. As they are well versed of thinking of examples from their experience and writing up evidence through pre- and post- registration training.

One member provided feedback on the APF as they felt it was not an aspirational framework; it needed to be something that would demonstrate how good you look, and they felt that writing the evidence and mapping it to the APF was not a particularly good way of describing in depth and substance what professionals had achieved. They also fed back that they found it difficult to see how it could be universally used across the profession as it seemed to favour academia and hospital practice.

c. Peer Assessment Tool (PAT)

All the participants found the feedback from the PATs helpful; for a lot of them the feedback they received was what they were expecting to hear. They felt it was reassuring to hear that they were doing well.

Even though the feedback was useful; a flaw in the PAT was that applicants can self-select the individuals chosen to provide the feedback which could introduce a bias. The validity of the responses and comments were queried, the individuals asked to complete the PAT would need to be familiar with the APF and without this they may not be able to fully assess the individual against a cluster. It was questioned how selecting excellent translated into competence.

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There were issues raised with individuals having to encourage the nominees to complete it for them and you can only enter the recipients once, so if you have not had enough responses you can't add additional names at a later date.

d. Record of Expert Professional Practice (REPP)

The participants that did complete this found the WBAs really helpful and they gained a lot from the experience. It was opportunity to demonstrate professional practice and knowledge and it provided them with assurance they are working at an advanced level assessed by experts in their specialist field.

The purpose of the REPP was questioned by some, as the additional conversation about the WBAs with the REPP assessor felt like duplication of effort as a lot of the same points were covered by the original WBA discussion. There was an appreciation for the need to quality assure the submission of WBAs. However, it was suggested it could be completed by submitting the original WBA with the assessors comments.

From a logistical point of view, it was difficult for Faculty members to source a REPP assessor and it was viewed as a time-consuming process for the REPP assessor to complete. If the REPP assessor was not from the member's specialist area, the REPP assessment was not considered valuable.

2. *Experience of building the portfolio*

Participants had been asked about their experience of collating evidence, how they found the mapping of the evidence to the APF and completing the impact statement.

As described to build the advanced practice portfolio, evidence was written about an event or scenario describing what happened, what skills, knowledge, attitudes and behaviours they have gained and how this has benefited their service users. This was then mapped to the appropriate cluster(s) with a self-assessment of the level the individual is demonstrating. They also had to complete an impact statement where they had to describe the impact this particular scenario has had on their practice for each cluster, they would like to demonstrate.

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a. Evidence collation

Participants found it straightforward to think of examples of evidence for their portfolio, it was noted that this part took time, and some had underestimated this. Particularly deciding what examples, they wanted to use.

Some participants felt there could have been more support provided on starting evidence collection and the level it should be written at.

A concern was raised that depending on the applicants work experience with compiling a portfolio, some individuals found it difficult to know what evidence could be added to the portfolio. There was a belief that evidence needed to be big projects. However, they can be examples of day to day roles to demonstrate how the competencies have been embedded.

With the competencies within the clusters it was thought the Management and Leadership competencies were very similar to each other. The Research & Evaluation, and Education, Training & Development clusters were described as having too many competencies, and whether these should be consolidated.

b. Mapping evidence to the Advanced Pharmacy Framework

The mapping of evidence to clusters and competencies within the APF and justifying it, was considered an important part of the process by participants. However, participants fed back they found the mapping process difficult to start with, as they were unsure what to do. Once they developed a routine it was considered quite repetitive and cumbersome.

This was echoed from an assessors' point of view; from the portfolios they assessed it was evident there could be more guidance on mapping evidence to the competencies as some applicants mapped everything to all the competencies and at times this was incorrect.

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Several participants fed-back there were two clusters that were harder to demonstrate evidence for: Education, Training & Development and Research & Evaluation.

c. Impact statement

Participants stated it was not clear what needed to be written in the impact statement; from the assessors' point of view these were not always completed concisely, and the quality varied between portfolios.

There was a consensus across participants the impact statements were contributing to a level of frustration about building the portfolio. An impact statement for each evidence mapped across a competence was thought to be a lot of duplication as participants felt they were writing similar things each time. It is appreciated an impact statement is required. However, this could be done once for each evidence.

3. *Online e-portfolio*

Participants were asked to reflect on their experience of the online e-portfolio to collate their evidence.

Some participants found the e-portfolio easy to use and did not have any issues. However, most participants found several issues:

- The e-portfolio was considered cumbersome to use; especially when mapping the evidence across to clusters in the APF.
- Entering the evidence is a two-step process, individuals found they had to click in and out or back and forth to enter and map evidence which added extra steps which made it cumbersome to use.
- It was viewed as difficult to navigate through the e-portfolio when participants first started their Faculty.
- It would be beneficial to be able to see the APF when mapping the evidence on the screen; many found they had to print the framework or have two screens open to refer to the APF during the mapping process.
- The GPhC revalidation e-portfolio template has been embedded on top of the current Faculty e-portfolio. There was a concern raised by the participants this will impact the quality of the Faculty entries as the template headings have been categorised into planned or unplanned learning rather than considering the impact of the learning. The categories are causing confusion, participants

are unclear how their entries would fit into the unplanned category as they believe the Faculty is a retrospective view of achievements. Additionally, it was thought to be unclear how the Reflective Account aligns to the Faculty.

- An option to use the old e-portfolio template for current Faculty members and Fellows for resubmission was raised.
- Participants who were resubmitting and building their portfolio for the second submission fed-back it was not easy to differentiate between the old and new entries.
- The current portfolio has a file repository. However, an upload function for the evidence entry would support the written statement.
- A spell check and an autosave facility was suggested as currently the e-portfolio times out.
- A request was made for the RPS app to be connected to the e-portfolio to sync the entries.

4. *Submitting the portfolio for assessment*

The participants were asked if they felt prepared to submit their portfolio and if the RPS had supported them.

Some participants said there was support when preparing their Faculty portfolio; some feedback throughout the process was suggested as valuable. Additionally, it was believed that there should be a pre-assessment model in which individuals were allowed to submit some evidence to receive developmental feedback throughout their journey to ensure they are writing evidences with enough depth and information.

Additionally, participants expressed a fear of failure as there was a possibility of being awarded a lower staging then expected; this self-doubt may have prevented applicants from submitting. There was a consensus across the participants that they continued to upload new evidence as it was difficult to judge sufficiency of evidence for the portfolio.

Some participants felt unprepared, because they worked in isolation and as there is lack of a professional network, they did not have access to members who had completed the Faculty or other applicants whilst preparing their Faculty submission.

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Participants commented they would like to know what to expect when they submit their portfolio; particularly more detail about the assessment process. Comments included more transparency about the assessment of the portfolio; how many assessors would be looking at it and what was their assessment criteria. Some participants were unclear if there was an appeal process and how they would appeal.

Curricula was considered key to the assessment process, the RPS was asked to support specialist groups with curriculum development and to consider having more input from the specialist groups to support the Expert Professional Practice cluster for specialist roles.

The assessors observed that there needed to be consistency in the portfolio assessment process as it could vary amongst assessors; especially the depth of feedback provided to individuals. It was recognised that it was a complex process to assess a portfolio and there was a level of subjectivity and a risk of misinterpretation. This was echoed by some participants who questioned the reliability of the assessment process as they thought they should have been awarded a higher staging. Two participants had their Faculty portfolio re-assessed and some of the clusters were staged lower than they had been originally, but this did not affect their overall awarded stage.

Assessors also expressed a need to improve the assessor training as it was felt the level and lack of follow up for quality assurance was insufficient given the complexity of the portfolios. Participants proposed assessors could meet over a year or at conferences to ensure consistent feedback and consistency in the process for quality assurance.

Assessors also expressed a concern that the assessment fee was not enough due to the time spent on assessing each portfolio and there was an apprehension the goodwill on which assessors are currently on will run out.

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a. RPS support available

There was a mixed response from participants to what support was thought to be available from the RPS, some participants felt there was a lack of support from the RPS throughout their Faculty journey. They expected to receive regular communications from the RPS about the resources available and to offer them support throughout their journey. However, participants from the earlier cohorts stated the RPS provided a lot of support and resources to help them through. Specifically, the webinars were identified as helpful to get participants started on their journey.

Responses varied depending on when participants had completed their Faculty journey. The first cohort felt they were well supported, as it was a new process everyone including the RPS were learning as they went along. Later cohorts said there was not a lot of proactive support but when they needed support and contacted the RPS directly they were adequately handled.

Requested additional support:

- Guidance on the amount of evidence required; this varies the numbers range widely and applicants have been assessed at the same stage with 10 entries or 50 entries. This could be standardised to ensure some applicants are not working harder for their submissions.
- Allow for a pre-submission check of the portfolio for informal feedback; to inform applicants if they are on the right track. This was considered a useful supportive tool.
- More examples of how particular roles met some of the clusters which individuals had perhaps not considered and examples of good evidence.
- A nominated mentor to work with the applicant to provide comments and feedback on their entries; a mentor could be allocated when signing up to the Faculty.
- Guidance for each sector with examples of evidences for the clusters that are harder to demonstrate.
- More examples of what good looks like and explanations of what makes a good quality portfolio.
- More local support; utilising the RPS local networks or the workplace leaders who have completed the Faculty.
- More support and information on what the resubmission process would be and how to advance to the next stage. Additional support from the RPS post submission every year to encourage the Faculty entries to motivate members to resubmit.

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5. The Faculty assessment report

Participants reported a mixed response regarding the value of the Faculty assessment report. Some participants found it helpful as the feedback reiterated what they were achieving and the development gaps they had identified going through the APF. For most participants it was clear to them why they had not achieved a higher staging even though they were aiming for it.

The feedback encouraged them to look at different areas and gave them confidence to continue with their journey and develop in additional areas. There was also mixed response to the spider diagram. Some expressed appreciation of the visual representation of their achievements and gaps. Others didn't understand the purpose of them as the written feedback was adequate. Some guidance on how to read the diagrams would have been helpful.

A small number of the participants have used their feedback assessment report by referring to it annually for their professional development plan. Some participants described the report and the recommendations as unhelpful and unrealistic as they did not feed into their professional development plan. Suggestions made to obtain Mastery in clusters were not thought appropriate. Some participants found they were awarded Mastery overall and were given feedback on how to improve the clusters within which they were already achieving Mastery and questioned the relevance of this. They felt the feedback was generic at times and there was no guidance on how to leverage the feedback to progress to the next stage. For an assessment fee of £300 some were expecting a level of personalised feedback to support their development to move up a stage.

With the feedback there was an assumption that the member wanted to advance through the APF and go up a stage. This was not always the case. Some individuals were content with the stage they were awarded and requested feedback regarding maintenance. A recommendation was made that there could be a section for Faculty members and Fellows to complete about where they want to be in 5-10 years, the assessors could use this when giving feedback and making suggestions for the future.

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Many participants requested for the Faculty assessment report to be accessible online as at the moment they are only send a paper copy.

6. Cost of assessment and maintenance fees

Currently, Faculty members and Fellows are charged a £300 assessment fee for the initial assessment of their portfolio and a maintenance fee to keep the postnominals. The maintenance fee varies depending on the stage awarded. (£50 for Advanced Stage 1, £75 for Advanced Stage 2 and £100 for Mastery). Participants were asked for their views on both the assessment and maintenance fees.

a. Assessment Fees

Most participants understood the need to charge for the initial submission as resource was required to assess the portfolio and felt £300 was a reasonable fee to pay. Some employers paid the assessment fees if they had mandated the completion of the Faculty in their appraisals process. If it was identified as part as the individuals PDP this was found to be an enabler. There is a concern about paying the assessment fees when resubmitting the portfolio.

Some participants expressed the assessment fee was too expensive when they were also paying for RPS membership fees, indemnity insurance and membership to other specialist groups. A point was raised about the early career pharmacists who may not be earning as much as senior pharmacists. Some suggestions were made about how assessment fees could be paid. Which includes in instalments or a tiered funding model developed depending on the level that members were aiming to achieve.

Many participants would prefer more of a celebration of being awarded the Faculty, by being awarded an APF staging members are demonstrating they are working at an advanced level and it is considered an achievement. They felt they were choosing to go above and beyond by completing the Faculty this should be celebrated with a Faculty pin ceremony akin to the RPS Fellowship presentations.

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b. Maintenance Fees

A high number of participants did not understand the reason for maintenance fees as they had not received any service or product from the RPS in exchange for this money. There was no communication from the RPS after their Faculty portfolio had been submitted and the feedback received. It was not considered value for money and they felt they are being 'punished' for completing the Faculty as they have to pay extra to keep the post nominals which demonstrates they had been peer reviewed to be working at an advanced stage.

The maintenance fees were considered more valuable if something was received in return, such as:

- A Faculty Alumni network
- Support with career development which would help members advance through the APF
- Networking events both nationally or regionally
- Reduced RPS membership fees
- Free conference passes for the national RPS conference
- A partnership with the affiliated groups and reduced attendance fees to their events.
- Regular communication from the RPS regarding development opportunities or reminders about entering in evidences to the Faculty portfolio
- A number of participants requested that, if maintenance fees were to be charged, they should be the same for all the stages as there was no difference in the support you receive from RPS on completing the Faculty.
- Overall, transparency was called for about how the assessment fees and maintenance fees are being used.

7. *Impact of the Faculty on practice*

Many participants said the Faculty had no impact on their practice or development, and it hadn't helped them achieve a senior role or the role they are currently undertaking. They thought they would have achieved it without the Faculty though it may have helped them get to it quicker.

Conversely, some participants found the Faculty to be a process that gave them personal validity and increased their confidence in their ability to work at an advanced level. Completing the Faculty provided a sense of achievement as it was

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an opportunity to reflect on what had been achieved over their career. It provided an opportunity to reflect on positive achievements as there were not many opportunities to take stock and celebrate success. They also reported that it encouraged them to identify their development gaps in a meaningful way and seek out projects that would address these gaps. These projects encouraged them to work outside of their comfort zone. For one participant; undertaking the Faculty was very positive for her and changed the direction of her career.

Working through the APF encouraged individuals to consider both their personal and professional development; it made them consider the clusters that they would not naturally focus on in their role. As they have found this to be a useful process, they have encouraged individuals in their team to use the APF as a development tool.

8. The Faculty Staging

Participants were asked about the Faculty stage they were awarded and their views on the different stages of the Faculty.

Most participants were happy with their awarded stage as they had been aiming for that particular stage; there were some that felt they should have been awarded a higher staging based on the number of years they had been qualified or awarded Mastery based on the experience they had gained even if they had not been qualified for 10 years.

Overall, participants felt the three stages outlined in the APF were sensible, any more stages would be confusing. The stages were thought to be a good way of supporting the development of pharmacists and helping them identify their areas of development. Across the board it was recognised there was quite a wide spectrum of advanced practice between Advanced Stage 2 and Mastery and the journey to develop from Advanced Stage 2 to Mastery could span a pharmacist's or pharmaceutical scientist's career.

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Concerns were raised the APF might be biased to individuals that work at a national level and that was considered to be the only way to obtain Mastery rather than recognising positive impact and practice that maybe occurring locally or regionally. There was discussion about whether the framework was able to recognise leaders working at an exemplar level in their areas. It was felt there needs to be more clarity about what it means to work at a Mastery level; it is not only about working at a national level, but it should also take into consideration the individual's sphere of influence.

There was a perception amongst the participants that working in particular areas of practice or if pharmacists or pharmaceutical scientists were doing particular roles it would not be possible for them to achieve Mastery. Some individuals might be given more opportunities depending on their organisations to participate in a variety of projects to develop their skills which would give them an advantage to be working at a more advanced level.

There was a view amongst some participants in addition to anecdotal feedback we have received that the number of years in practice should be indicative of the staging awarded rather than what the individual has achieved throughout their career.

9. *Views on a proposed annual model and aligning the Faculty to Revalidation*

Participants were asked their views on an annual model, potential advantages and disadvantages and if the Faculty should be aligned to Revalidation. The current model for the Faculty is an initial submission of the four elements outlined in Figure 3. For members to maintain their Faculty status they are required to resubmit a portfolio every five years. The portfolio requirements for resubmission were not agreed and there was a perception that a full portfolio would need to be resubmitted.

The proposed annual model was an initial submission of a full portfolio; to maintain the awarded Faculty status members would be required to submit a smaller portfolio (including a peer discussion and reflective account) annually to align with GPhC

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requirements for revalidation. For members wishing to move up a stage they would be expected to submit a full portfolio when they feel ready to do so.

b. Views of the proposed annual model

There was a general consensus and positivity amongst the participants to move to an annual model as it was perceived as more 'do-able' to keep topping up evidence every year i.e. something they would keep adding to. Very few participants had been maintaining a portfolio of evidence since their initial Faculty submission and the thought of sitting down to produce a portfolio demonstrating practice over a five-year period felt overwhelming. When forming the proposed model, the consideration of submitting a high-quality evidence was essential to ensure maintenance rather than considering the quantity of evidence required.

There was also agreement that if the individual would like to advance through the APF they should resubmit a full portfolio when they are ready to, rather than within a certain time frame.

However, for some participants there was still a concern about how the Faculty benefited them professionally and an annual model would not motivate them to continue with the Faculty as they do not believe the process was of value to them.

The point of needing to resubmit and demonstration of maintenance of an awarded stage was raised again with this model; if individuals were not aspiring to go up a stage some participants do not see the value of submitting evidence for maintenance; there was a view that once you have demonstrated you are working at an advanced level and do not want to progress or already at Mastery you would not lose those skills.

There were a lot of questions and points raised about the detail of the proposed annual model which needed clarifying; these were:
- How much evidence needed to be submitted annually?
- How many competencies and clusters need to be covered to demonstrate maintenance? It would not be possible to demonstrate all 36 competencies or all 6 clusters every year.

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- Will the assessor have access to the members' previous entries to see if progress was made if they are assessing a resubmission for progression?
- What would be the costing model of an annual model? The fees currently were thought to be quite high so what would you get for your money?
- Would members receive feedback on your entries? Something that the GPhC don't currently offer unless you are called for review.
- For maintenance would there be an expectation for individuals to fill in their gaps or build on previous evidences?
- If REPP assessments were required for the annual model, would REPP assessors need to be Faculty members and Fellows, could they be anyone like the GPhC peer discussion requirements?
- The funding model needs reviewing to see if an annual fee is appropriate and what Faculty members and Fellows can expect for this fee.
- What would be the consequences of not submitting the Faculty annually? Would members lose their post nominals?
- There will need to be clear guidance on what is expected from the entries to ensure they are suitable for both things.

If an annual model was considered participants expressed that it would need to be light touch; four entries, peer discussion and a reflective account to align to GPhC revalidation. Participants felt it would be unrealistic to expect a REPP and PAT to be completed annually.

A concern was raised by some of the assessors that moving to an annual model would impact their workload; currently assessors volunteer to assess portfolios and their effort is recognised with a nominal fee for each portfolio assessed. They reflected that the effort that is required to assess a portfolio doesn't equate to the amount paid and if the number of portfolios increase assessors may choose not to participate in assessing.

c. Aligning the Faculty to GPhC Revalidation

On the whole there was support to align GPhC Revalidation and the Faculty as it could reduce duplication and individuals could cover both processes with one entry. Aligning the two processes has been considered an enabler by participants to maintain their Faculty.

However, some participants raised a concern the GPhC's Revalidation requirements and the Faculty do not align as they were considered two very different processes. They require different levels of entries; GPhC Revalidation is about demonstrating

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continuing professional practice, what has been learnt or what learning is being planned. Whereas, the Faculty is considered a more in-depth reflection of what has been achieved by the individual and the impact this has had on the individual's development and practice. Some participants felt aligning the two processes could potentially devalue the Faculty, as it could remove the developmental and aspirational element of the Faculty.

The alignment may work if the Faculty entries could be used for revalidation rather than the other way around, as they would be mapped across to the APF. However, if the RPS were to continue to use the GPhC template for the Faculty guidance for members is required on how to make entries.

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Discussion

Limitations

The limitations identified with this project are that only 14% of Faculty Members and Fellows were interviewed via focus groups and one to one structured interviews which gives us an idea of what members think but it may not be a representative view of all Faculty Members and Fellows.

60% of the participants identified hospital practice as their primary sector, which may have influenced the overall findings to have a hospital pharmacist perspective of what a professional development process should look like and what would be reasonable to re-submit compared to working in other sectors. Some participants were mindful of access to opportunities to develop skills in particular sectors and the roles that pharmacists are undertaking and whether they would be given the opportunity to develop.

52% of the participants were from the first wave of the Faculty and were awarded Mastery, as the results have indicated dependant on the numbers of years of experience members have used the Faculty for different purposes. Therefore, their views on a having a maintenance model and what it should look like may differ to a pharmacist awarded Advanced Stage 1 or 2, as what they need from the Faculty may be different. This may influence their views on the proposed model and whether a resubmission is needed.

Motivations to complete the Faculty

On the whole; participants expressed they were supportive of the principals of the Faculty as they had found it to be a valuable process to undergo. Using the APF supported them to reflect on their practice, highlighting their achievements and identifying their gaps in a meaningful manner. This has had a positive impact on their professional development.

Going through this was thought to increase their confidence in their ability as they had been quality assured through a peer reviewed process and given assurance and credibility that they are working at an advanced level.

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Participants spoken to were not driven by obtaining post-nominals. For many of the first wave members, the Faculty was described as an innovative and novel process which recognised their advanced practice and allowed them to demonstrate to the profession, they were role models in their area of practice. Their motivations for completing the Faculty were to be seen as leaders and champion the Faculty process. Faculty members and Fellows in the later cohorts were motivated to complete the Faculty to provide assurance to patients, public, the profession and other healthcare professionals they were working at an advanced level through a peer review process. The peer-review element carried a lot of weight for individuals as it was recognition from within the profession they are working at an advanced stage.

It was recognised that the Faculty and the APF is a good self-development tool and the only one available to pharmacist and pharmaceutical scientists that recognised advanced practice across all areas of practice in both clinical and non-clinical settings. However, there was a concern that it encouraged advanced generalists rather than advanced specialists as they must demonstrate advanced practice in all the clusters at high levels to achieve Mastery. This could discourage members from undertaking the Faculty if their roles only allowed them to focus on particular clusters of the APF as they would not be able to demonstrate advanced practice consistently across all six clusters.

Purpose of the Faculty

The purpose of the Faculty needs clarity, it means different things to pharmacists at different stages of their career; is it a credentialing, recognition or a development tool or something that provides a snapshot of where the individual is currently practicing? There were a number of different reasons for individuals undertaking the Faculty which were dependant on where they were in their career. More experienced pharmacists further on in their careers consider the Faculty a process they need to 'complete' as it is providing retrospective recognition of their achievements throughout their career. Pharmacists earlier on in their career; aiming to achieve Advanced Stages 1 or 2 are undertaking the Faculty to build a portfolio to identify

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gaps in their practice and look for opportunities to fill those gaps before or after submitting their portfolio, therefore using it more as a self- development process.

The Faculty Process

The process of building the portfolio mapped against the APF was found to be the most valuable element of the whole Faculty process, in addition to being a tool to support reflection of achievements building the portfolio was an opportunity to bring together an individual's experience in different areas of practice in one place. This recognises them professionally as a whole without the title of different sectors. This also allowed them to feel like a member of the profession rather than the area of practice they are currently based in. Additionally, it had the potential to be an empowering tool to the individual as it armed them with the ability to know what level they were practising at and where their developmental areas were.

Even though members were supportive of the principles of the Faculty, the process needs to be made more accessible and easier to complete. A lot of the feedback received regarding the barriers were mostly based on the process.

There are currently four different elements that are required to build the Faculty submission (figure 3); participants found each element to be useful and gained something from each one. However, within each element repetition or duplication could be removed to streamline the process.

Time Taken to complete the Faculty

The RPS could be more realistic about the time it will take to complete the Faculty; amongst the participants there was a range of time it took to complete from participants taking a week off work to 2 years. This may be reflective of the individuals learning style; also how they were using the portfolio. Some participants were building the portfolio to highlight their gaps, fill them and then submit when they felt ready to rather than seeing it as a process they need to complete. However, the RPS currently advertise the Faculty could be completed within 8 weeks which raises individuals' expectations that it is something easy to complete so when it takes

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longer, they become demotivated or feel like they went through a very time onerous process.

Support and Navigation

The Faculty resources would benefit from streamlining and navigation through the Faculty portfolio should easier. There are currently lots of resources available which have been produced based on member feedback. However, signposting resources for participants when they first join up could help progression. There were mixed views on the level of support the RPS provides; some participants have requested guidance for pharmacists working in particular sectors or guidance on how to start writing the evidence and/or the number needed. This was all available, but it could easily be missed because of difficult navigation.

Online Portfolio

To support with making the process easier and more accessible; the online e-portfolio should be improved to be easier to use and navigate through. Currently, when entering evidences, it is a two-step process to map the evidence and demonstrate the impact it has had on the individual's practice. As this needs to be done for each evidence it is quite time consuming and cumbersome to use. As the APF can't be viewed when mapping the evidence there was a need for two screens to be opened and to toggle between the two which again makes it a lengthy process. Improving the experience of using the e-portfolio would improve the members experience of building their portfolio.

Resubmission

As the purpose of the Faculty is unclear this raised the question as to whether a resubmission model was required. Some participants view the Faculty as a one-off process to complete rather than build upon; to them it provides quality assurance they have achieved and are working at an advanced level; this was a view seen amongst participants who have achieved Mastery. They said that they had demonstrated they were masters' of their expert area which was something they would not lose over time. There was also a concern that individuals who had previously demonstrated Mastery may not be able to demonstrate their breadth of

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experience within the five year timeframe, as they have a smaller window of experience to draw from and their roles may have changed or moved to a different area of practice. This would increase the risk of them not being awarded Mastery on their resubmission. They expressed that this would be unfair as it would not be recognising their previous experience and it is considered a barrier to resubmitting. Defining whether the Faculty is a process that recognises members achievements throughout your career or recognition of the stage they are currently working at would be useful.

There was an agreement that a resubmission model should be required for members who would like to advance their stage. However, the origin of the time frame of submitting every 5 years was questioned. Participants felt that there was an assumption that members would be ready to advance between Advanced Stage 2 and Mastery within 5 years., However, it was suggested there is a wide spectrum of advanced practice between Advanced Stage 2 and Mastery and it could take up to 10 years to be ready to advance to Mastery. Asking to resubmit a portfolio every five years feels they should be ready to move up a stage by then. It may be easier to achieve if moving from Advanced Stage 1 to Advanced Stage 2. Participants do not see the value in resubmitting a portfolio every 5 years to be awarded the same stage but would like to keep their post nominals until they feel ready to resubmit their portfolio for advancement.

Cost

The costing model of the Faculty was considered a barrier to individuals undertaking the Faculty. Consideration of what the RPS can give to their members for them to consider the Faculty value for money is important. Participants understood the need for an assessment fee, but the maintenance fee should be reconsidered. Currently, Faculty members and Fellows do not receive anything for the annual fee; participants indicated that some form of communication, access to a network of Faculty members and Fellows or discounted membership/conference fees would be considered value for money. There needs to be a review of other organisations to see if there are similar recognition/development programmes that are considered value for money. A review of their costing model and what support to they provide

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their members. The Higher Education Academy Fellowship and the Royal College of Nurses credentialing programme have assessment fees but not maintenance fees and have been cited as model akin to the Faculty.

The cost combined with the view that the Faculty was not recognised by employers and other healthcare professionals, even though participants felt a sense of achievement and it increased their confidence in their practice they don't think it supported them advancing in their career. Resulted in participants questioning the value of the Faculty. With the time it takes to complete, cost and the lack of recognition and impact on their career it is considered there is no return of investment both financially and the time spent.

Professional Development and Advocacy

An incentive for participants to maintain their Faculty membership and consider it a valued process it needs to be recognised by employers and could be introduced in job descriptions as a desirable to introduce a culture of completing the Faculty to increase individual's opportunity to obtain more senior positions. For pharmacists to be motivated to complete the Faculty it needs to be considered a gateway or milestone that needs to be achieved for them to progress in their career. Considerations need to be made about how the Faculty can be linked to pharmacists career development and how it can support them to change sectors or advance in their career.

Chief pharmacists interviewed recognised the need to add the Faculty in job descriptions. However, there were recruitment issues with some NHS Trusts experiencing significant vacancy rates. Adding in a requirement of the Faculty in the job description could reduce the number of applicants who are suitable to complete the role significantly and trusts were not in a position to do that in the current climate. Another problem highlighted was that the Faculty was an introspective process for pharmacists; adding it into job descriptions and having it as a requirement for the profession maybe a problem for roles where the senior management and employers were not pharmacists as they will not be aware of the importance or principals of the

Faculty. Therefore, work needs to be done to support non pharmacy employers and other healthcare professionals understand the Faculty.

RPS Wales has made great progress with adding the Faculty into job descriptions for hospital pharmacist roles. However, this has not translated into numbers of Faculty submissions. This could be due to the criteria being desirable and therefore not essential to get the job.

To support with the Faculty being a requirement in the recruitment process it needs to become embedded into the professional development culture for pharmacists and pharmaceutical scientists. The APF and principles of the Faculty need to be introduced early into their professional development pathway; the online portfolio needs to be considered a repository where individuals collate evidence throughout their career using the APF as a self developmental tool after completing foundation training. Submission of the portfolio can be done when the individual is ready to.

For the APF to be considered a self-development tool, work needs to be done around the perception of being awarded a particular stage. Currently, being awarded Advanced Stages 1 and 2 may be considered a failure as they are not deemed good enough, however they should be considered achievements as they are demonstrating competencies and skills at an advanced level. There should also be some guidance for the length of time individuals need to be demonstrating a skill before they can be considered an 'expert' and working at a Mastery level. There was also a perception the APF stages are reflective of the number of years qualified rather than the skills and competencies developed over an individual's career; should we be restricting the ability to achieve Mastery to pharmacists qualified more than 10 years?

Some participants suggested opening the Faculty access to non RPS members to encourage membership to the Faculty and then in turn to the RPS if there are additional incentives of being an RPS member to completing the Faculty such as access to the mentoring platform to support with the Faculty.

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Annual Model and Revalidation

Moving to an annual resubmission model was considered an enabler compared to a five-year resubmission model; the majority of participants had not accessed their Faculty portfolio since their initial submission and the thought of doing a second submission of a portfolio was overwhelming. Submitting evidence annually would feel more manageable. More details of the annual model need to be considered to ensure the quality of practice is being demonstrated.

An annual model would also support with aligning the Faculty to the GPhCs Revalidation. There was support for aligning the two processes by majority of participants as it would remove the duplication. However, some participants were concerned that aligning the two would devalue the Faculty as the level of detail and reflection required for GPhC Revalidation is perceived to be at a lower standard. This may result in individuals leaving the Faculty. To support this the Faculty entries may need to be used for GPhC Revalidation as they would contain more details and be mapped across to the APF. Guidance would be required on how to produce entries for both the Faculty and GPhC Revalidation that are written at an advanced practice level.

Assessment and Feedback

The different elements of Faculty were valued by the participants. Building the advanced practice portfolio was a positive experience for the majority of the participants and it gave them an opportunity to look back and reflect on their achievements in their career as we normally only reflect when things go wrong. The PATs were also valued by the participants, again obtaining multisource feedback is not something we seek out throughout our career. However, improvements can be made to the assessment elements to reduce duplication of effort such as the need to complete an impact statement for each cluster an evidence is mapped to. Additionally, the REPP assessment needs to be reviewed. Participants valued the WBAs however the conversation with the REPP assessor was deemed to be a duplication. There needs to be consideration of how the WBA can be quality assured in a more effective way.

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Other considerations that were highlighted through the data collection were; the Faculty assessment process needs to be more transparent; there should be more information about what is being assessed and what will happen during this process. The assessors have felt that there could be additional assessor training to ensure consistency of assessments and quality assurance.

The Faculty Assessment Report was found to be useful but there is room for improvement on the feedback and suggestions of how individuals can develop their gaps to make them more realistic and achievable in their areas of practice. The feedback includes suggestions of advancing to the next stage which makes individuals feel they should always be aiming for Mastery; there should be considerations made to those that would like to stay at the level they are working at and suggestions of how to maintain that level of practice.

There needs to be some clarity between the role of the assessor and a mentor; the feedback from the participants asked for realistic objectives to be set to achieve the next stage. However, the assessor role is to assess the portfolio submitted and determine the stage of the participant. A mentor would be more suitable to provide detailed feedback and support in objective setting to advance their level.

Marketing and Communication

An improved marketing and communication plan about the benefits of completing the Faculty and additional communications directly to Faculty members and Fellows once they have started their journey throughout their time as a Faculty member. There could be a real opportunity for the Faculty as it currently recognises performance irrespective of the area of practice and it links interprofessional models of practice. It also has the possibility to inform patients, public and other healthcare professionals of the competencies the pharmacist is able to demonstrate. The post nominals are a way of recognising that individuals have been endorsed through this process.

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Recommendations

Based on the data collected from the participants the recommendations below have been suggested. It is appreciated that some are achievable in the short and medium term and some require some strategic considerations and therefore need to be considered over the long term.

Short Term (3-6months)

- Establishing and clarifying the purpose of the Faculty; this needs to be clarified before an annual re-submission is considered. This presents challenges with trying to establish the details of the annual model and what will be required and what is being assessed.
- To support the Faculty builders the Faculty landing page and portfolio should be made easier to navigate through. It needs to be clear where the member needs to start and what they need to do for each stage.
- Setting up a network of Faculty members and Fellows to act as mentors for those undergoing the journey or using each other as a resource. This will be addressed by the RPS mentoring programme which is due to be launched summer 2019.
- Producing a communications and marketing strategy to support the following:
  - Supportive communication for members throughout their Faculty journey. From initiating the journey with a welcome email on how to get started through to submission and resubmission. Such as a remainder email that resubmission is due.
  - An improved marketing strategy to showcase the benefits for completing the Faculty.
  - Change the perception of being awarded a particular stage; Advanced Stage 1 or 2 are not failures and not everyone will and needs to obtain Mastery.
- Introducing the Faculty earlier into the pharmacists' career to embed the culture of building a portfolio as part of the professional development journey.

Medium Term (6 to 12 month)

- To determine the details of an annual submission model aligned to GPhC revalidation; such as how many evidences are required and how many APF clusters need to be demonstrated to build recommendations for an annual model.
- Review the need for resubmission if individuals are not aiming to move up a stage or have achieved Mastery.
- Reviewing the different elements of the Faculty assessment and how they can be adapted to be more accessible and if they are all required in an annual resubmission model.

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- Improving the online portfolio:
  - The process of mapping the evidence across to the APF needs to be made easier and less time consuming.
  - Removal of the duplication of completing impact statements for each evidence when mapping to different clusters of the APF
- Working more closely with employers and organisations to identify the value of using the APF as a self- development tool. It could be used internally for employer appraisals to set objectives and eventually submit to the Faculty.
- Consider a deadline for submission which will support members and help the RPS plan their assessment workload.
- Considerations need to be made about how the Faculty can be linked to pharmacists career development and how it can support them to change sectors or advance in their career.

Long Term (12 – 24 months)

- Reviewing the initial submission process to make it more accessible and easier to navigate through the number of resources available:
  - Streamlining the resources available online; applicants are feeling overwhelmed on initiating and working through their portfolio and as a result are not completing through to submission.
  - Due to the large amount of information and resources available; the information needs to be reviewed to what is necessary.
- To determine the details of an annual submission model aligned to GPhC revalidation; how many evidences are required.
- To review access to the Faculty without RPS membership
- Improve the online portfolio platform to enable a more streamlined experience when compiling the APP and for it to be possible to transfer evidences to GPhC revalidation portfolio.
- Review the funding model of the Faculty; need to consider the value proposition of the Faculty as a whole. We are aware that members are happy to pay an assessment fee, but the maintenance fee needs to be reviewed. Further exploration of what members would consider value for money maintaining their membership.
- Working more closely with Specialist Groups and affiliated partners within pharmacy and multiprofessional Royal Colleges, to help them recognise the Faculty and support their members to recognise it as a quality assurance process for pharmacists. What different stages mean and what that indicates about the level of experience of the pharmacist they are working with.
- Better partnership with Specialist Groups within pharmacy for members working in specialist areas to support with developing curriculum for the Expert Professional Practice (Cluster 1) of the APF.

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In conclusion; a number of improvements and changes are required to the current Faculty service before an annual resubmission is considered to address the problems experienced and an improved communications and marketing plan to share the benefits of completing the Faculty.

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Appendix 1

The Faculty Focus Group Information Sheet

Introduction

The RPS are reviewing the initial submission and resubmission process for t
the Faculty to align with the GPhC revalidation process, the aim of the new model is
Faculty members and Fellows will submit a number of evidences including a peer
discussion to maintain their Faculty status which they can also submit to the GPhC
to maintain their registration.

As the Faculty has now been established for five years and with the introduction of
revalidation by the GPhC we felt it would be a good opportunity to reflect on
members experience of the current model and align the Faculty with revalidation to
streamline both processes.

To support with the development of the new model we are conducting focus groups
to gather data from Faculty members who have experienced different stages of the
Faculty journey through to completion. The themes that will be explored are:

- Engagement with the Faculty– factors that motivated individuals to start and complete the Faculty journey
- To explore the barriers to the Faculty submission and reasons for not completing the Faculty journey
- To highlight the elements that worked well and areas that could be improved to upload entries for portfolio collation and submission of the Faculty
- To discuss the assessment of the portfolio and subsequent feedback to the member.
- Cost of assessment and top-up fees
- Views on the proposed annualised model

A number of focus groups are being held in phases to collect the data from Faculty
members at different stages through their Faculty journey from activation of the
portfolio through to submission. We will also be collecting data on RPS members
who are in a position to activate their portfolio to start their Faculty journey and have
not yet started. The data will be collected using an audio device, which will be
analysed into key themes. This data will be used to inform and develop the new
annualised model and used to write up a research report to support the development
of the model.

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Appendix 2

Consent Form

Information:
Please read the following information before signing this form.
The purpose of the focus groups is to support the development of a new annualised Faculty model. The aim is to collect data on the current the Faculty submission and resubmission process, focusing on the themes below:
Overall engagement and motivation through the Faculty journey
Collation of evidence for the portfolio
The systems used to collate and map the evidence across the clusters
The assessment of the submitted the Faculty portfolio
The feedback to the Faculty member following assessment of the portfolio
Cost of the Faculty, both assessment and maintenance fees.
The new proposed model.
In each of the themes we will be looking to see which elements worked well and the areas that could be improved.

Please read the following information carefully. If you are willing to participate as an active member of the focus group, please indicate this by circling the relevant answer below. If you are not happy to take part, or have any queries regarding the below, please speak to the facilitator.

Please complete the following:	Yes / No
The facilitator has explained the purpose of the focus group fully, and I understand my role in the process.	Yes / No
I consent to my participation in the focus group being audio-recorded	Yes / No
I consent to recordings of my participation being used for research purposes	Yes / No Yes / No

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I consent to direct quotes from my audio-recordings/feedback being used for research purposes I consent to taking part in the focus group I consent to providing my contact details for follow-up information/questions		Yes / No
Participant Signature:		Date:
Facilitator Signature:		Date:

If you have any queries, or for further information, please contact Aman Doll (Amandeep.Doll@rpharms.com).

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Appendix 3

The Faculty Focus Group Questions

Themes (What worked well and what needs improving)

Overall engagement and motivation through the Faculty journey

Factors that motivated individuals to start the journey

Factors that enabled continued motivation throughout the Faculty journey

Why do individual's loose motivation through the Faculty journey

What could be done to maintain motivation through the Faculty journey

Did you have a network to support you through the Faculty journey

What motivation do you require to maintain motivation for the second submission?

For those who have not completed their Faculty journey:

What were the barriers to the Faculty submission?

What were your reasons for not completing the Faculty journey?

What are your views on the different the Faculty assessments?

REPP

Peer Assessment Tool (PAT)

Case/Practice Based Assessments

Portfolio

What are the benefits to the above assessment methods?

What are the barriers to the above assessment methods?

Evidence and assessment collation for the portfolio

To highlight the elements that worked well and areas that could be improved to upload entries for portfolio collation and submission

How did you collate your portfolio? Manual or electronic

How easy was it to collate your evidence?

Did you know what to evidence to collate

Did you know how to map your evidence across to each of the clusters?

Did you know how many evidences you needed to submit

What did you think about the clusters you needed to map the evidence across to?

How big a time commitment was it to complete your Faculty

The systems used to collate and map the evidence across the clusters

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Did you produce a paper portfolio?

Did you produce an electronic portfolio?

What were the positive elements of your method?

How do you think the evidence collation method be improved?

Show the current portfolio and ask for feedback

The assessment of the submitted Faculty portfolio

What are your views of the different stages of the Faculty?

Do you think there is value in the development approach to the Faculty?

What are you views on resubmitting a full portfolio to maintain the Faculty every 5 years?

Did you feel supported and prepared when submitting your portfolio?

Are you aware of the assessment method used?

The feedback to the Faculty member following assessment of the portfolio

Did you find the feedback from the Faculty assessment helpful?

How do you think it could be improved?

What are your views on the feedback method?

Cost of the Faculty, both assessment and maintenance fees.

What are your views on the assessment fees for the Faculty?

What are your views on the Faculty maintenance fees?

What would you expect to see with the maintenance fees? E.g. dinner, the Faculty event, free RPS conference pass?

The new proposed model.

The current model is: an initial submission of a full portfolio and to maintain the Faculty status required to submit a full portfolio

Proposed new model: an initial submission of a full portfolio and to maintain the Faculty status submit 6 evidences (including a peer discussion and reflective account) annually.

What are the benefits to the proposed model?

What are the disadvantages to the proposed model?

How has your practice been affected by completing the Faculty?

What benefits if any have you noticed on completing the Faculty – CPD or Senior role?

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How would you feel about being awarded advanced stage 1 or 2?

What was your view on the initial submission to the Faculty?

What are your views on the ability to access and complete the Faculty after 2 years of being qualified?

When submitting entries every year are, they saved to build on each year? Do the assessors see previous entries?

Overall, what was good about the Faculty and what could be improved

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Acknowledgments