



## module 233

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Welcome to the two hundred and thirty third module in the *Pharmacy Magazine* Continuing Professional Development Programme, which looks at the RPS Faculty. Journal-led educational programmes are an important means of keeping up to date with clinical and professional developments. Completion of this module will contribute to the nine pieces of CPD that must be recorded a year.

Before reading this module, test your existing understanding of the subject by completing the pre-test at [www.pharmacymagazine.co.uk](http://www.pharmacymagazine.co.uk). Then, after studying the module in the magazine or online, work through the post-test on the website or the questions on pviii. Record your learning using your personal online learning log or complete the form at the end of this module.

### The RPS Faculty and advancing your professional development

*Pharmacy Magazine's* CPD programme can form part of your professional development, providing you with essential knowledge and skills. It can also be considered alongside other activities for inclusion in your RPS Faculty portfolio.

The RPS Faculty is a professional recognition programme for all pharmacists in all sectors at all stages of their career and involves assessment of a practice-based portfolio that recognises their professional development.

This allows you to demonstrate to others your level of attainment and stage of advanced practice. It also helps you identify what you need to know at different stages of your career. Start your Faculty journey by accessing the portfolio and tools at [www.rpharms.com/Faculty](http://www.rpharms.com/Faculty).

## for this module

### GOAL:

To provide an overview of the Faculty – the Royal Pharmaceutical Society's professional recognition programme.

### OBJECTIVES:

After completing this module you should be able to:

- Recognise how the Faculty fits with a community pharmacist's professional development
- Understand the benefits of joining the Faculty
- Identify evidence of your advanced practice and start building a Faculty portfolio.

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# the continuing professional development programme



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This module is suitable for use by community pharmacists as part of their continuing professional development. After reading this module in the magazine or online, complete the post-test at [www.pharmacymagazine.co.uk](http://www.pharmacymagazine.co.uk) and include in your personal learning log. CPD is one aspect of professional development and can be considered alongside other activities for inclusion in your **RPS Faculty portfolio**.

## The RPS Faculty

**Contributing author: Lesley Johnson MRPharmS,**  
RPS Faculty development lead

### Introduction

The Royal Pharmaceutical Society Faculty is the first professional recognition programme for pharmacists across all sectors. It is available to RPS members who have completed their first two years of practice – not only in a community setting but also in other sectors, such as NHS, industry, academia and regulation.

### What is the Faculty?

Pharmacists possess a wealth of knowledge from clinical skills to professional behaviours, which results in effective patient-centred care and the development of medicines expertise. This knowledge base and skills, experiences and behaviours are being developed from the first day of registering as a pharmacist and continue throughout a career.

Yet, to date, there has been no formal recognition of this advanced practice. The RPS identified a need for members' expertise to be recognised by providing evidence of capability to commissioners, alongside evidence of the effectiveness of delivering pharmaceutical care to patients.

The RPS Faculty – a robust yet simple professional recognition programme – helps pharmacists identify what they need

to know and do at different levels of practice and where they can access the necessary knowledge, skills, experiences and behaviours.

An assessment process looking at a pharmacist's professional development and advanced practice via a portfolio is the route to achieving Faculty membership.

### What does the Faculty mean for community pharmacists?

In community pharmacy the role of a pharmacist is extremely varied and challenging (professionally and commercially), so it is important that pharmacists are recognised for their breadth and depth of expertise in generalist practice.

Membership of the Faculty, through special post-nominals, provides recognition of advanced practice by colleagues within community pharmacy, peers in other pharmacy sectors, other



### The RPS Faculty in a nutshell

The aim of the RPS Faculty is to ensure that pharmacists are recognised as experts in medicines use and management and pharmaceutical care, across all sectors of the profession.

healthcare professionals, patients and the public. It also plays an important part in any pharmacist's professional development by helping them to identify gaps in knowledge or areas of weakness in their career pathway.

Professional recognition through the Faculty will also help to:

- Provide evidence that patient safety – in the context of pharmaceutical care – is being addressed
- Enhance the quality of pharmaceutical care by recognising or evaluating the core competencies expected of a community pharmacist at a defined level of practice
- Provide evidence of performance for community pharmacists.

### How the Faculty fits with CPD

The Faculty and CPD align closely with each other. Any training, learning or development activities that are undertaken when preparing for Faculty membership can be considered when recording CPD. Conversely, any CPD record can be used for the Faculty portfolio and assessment.

### Continuing fitness to practise

In the next few years the General Pharmaceutical Council will be changing the CPD review process by introducing continuing fitness to practise (CfTP) requirements – previously referred to as revalidation – which will require pharmacists to demonstrate how their CPD has changed their practice.

Figure 1: Faculty assessment



The CfTP framework is made up of three components:

#### Peer review

A review of a pharmacist's work will be conducted by a professional peer, based on the person's scope of practice.

#### CPD review

The GPhC will evaluate the current CPD process and introduce a modified version of it in parallel with the new framework. The intention is that the new approach to CPD will focus on the relevance of CPD entries to a pharmacist's scope of practice.

#### External performance indicators

This process will involve a review of external performance measures, which will vary according to the scope of a pharmacist's practice.

The RPS Faculty assessments and membership currently align well with the proposed CfTP framework. The Faculty's tools, services and processes will continue to support community pharmacists in meeting CfTP requirements.

### How can you become a Faculty member?

Joining the Faculty involves undertaking an assessment by Faculty assessors. This will consist of:

- A review of your Faculty practice-based portfolio
- Peer assessment or testimonials
- An assessment of expert practice.

Membership of the Faculty will be awarded on completion of a successful assessment. As a marker of his/her personal stage of development, each member will also be designated to one of three stages:

- Advanced Stage I
- Advanced Stage II
- Mastery.

### Structure of the Faculty portfolio

The Faculty practice-based portfolio allows pharmacists to gather evidence of their professional development and to identify what stage they are currently at by self-assessing against the different competencies and stages.

### Reflection exercise 1

Are you aware of the changes to the CPD review process? Further information and updates are available on the GPhC website: [pharmacyregulation.org/education/revalidation](http://pharmacyregulation.org/education/revalidation)

It can also help pharmacists to identify areas they might want to develop further.

The portfolio is divided into clusters and competencies. There are six clusters that cover the key and core areas of practice in community pharmacy. Being generic, they are also applicable to practitioners working in other sectors.

### The clusters

The six clusters are:

- Expert professional practice
- Collaborative working relationships
- Leadership
- Management
- Education, training and development
- Research and evaluation.

### The competencies

Each of the six clusters is then divided into competencies (ranging from two to nine per cluster), which describe the knowledge, skills, experience or behaviours required. There are 34 competencies in total across the six clusters.

For example, the cluster 'Collaborative working relationships' is divided into two competencies:

- Communication
- Teamwork and consultation.

### Stages of development

Each competency is then described in terms of three stages of development (Advanced Stage I, Advanced Stage II and Mastery) to determine the level of advanced practice (see Figure 3).

### The Faculty assessment

As we have already seen there are three components to the Faculty assessment:

- Practice-based Faculty portfolio
- Peer testimonials
- Expert practice assessment.

In order to start the process of becoming a Faculty member, you will need to access the Faculty's online portfolio and tools. This can

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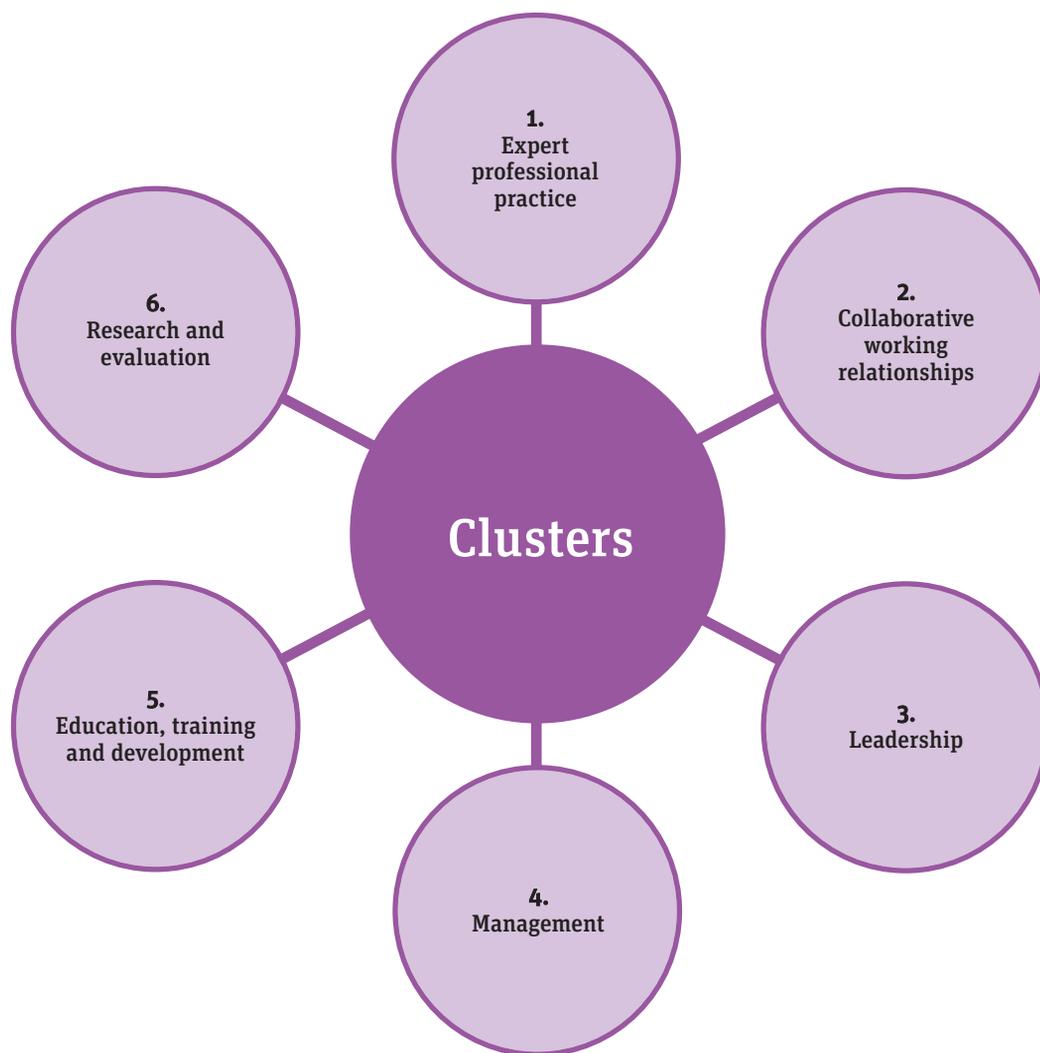
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## Pharmacy Magazine CPD modules

provide you with knowledge to help you to develop and advance your practice and can be recorded in your Faculty portfolio.

Start your journey now by accessing the Faculty portfolio, tools and resources at [www.rpharms.com/Faculty](http://www.rpharms.com/Faculty)

 **Figure 2: Structure of the Faculty portfolio**


be done by completing a form on the RPS website ([rpharms.com](http://rpharms.com)).

After you have familiarised yourself with the portfolio and tools, the next step is to start collecting key evidence and building your portfolio using the following guidance.

### Building your Faculty portfolio

#### Step 1: Identify and gather evidence

The portfolio will be a collection of key achievements, projects, events and responsibilities. Before starting to build a portfolio, use the following examples to identify these key achievements (N.B. This is not an exhaustive list):

- Professional CV or job description
- Existing portfolios (e.g. GPhC CPD portfolio)
- Current and previous roles (from the last five years)
- Recent performance reviews/appraisals (from the last five years)
- Significant pieces of work/projects, such as publications, presentations, policies, practice and/or clinical, business and financial projects.

Other examples could be involvement in conducting or collating results from an audit, working with local GPs, LPC or other equivalent in different countries, or documentation from queries, interventions or resolving problems.

 **Reflection exercise 2**

Read the Faculty Handbook ([rpharms.com/faculty/faculty-resources.asp](http://rpharms.com/faculty/faculty-resources.asp)) to get an understanding of clusters, competencies and stages.

### Examples of evidence

Many activities and situations that community pharmacists come across in day-to-day practice can be used as evidence in the Faculty portfolio to demonstrate advanced practice.

What follows is a brief overview of each of the six clusters that make up the Faculty portfolio, together with examples that might be relevant to the portfolio or prompt ideas for the types of evidence that could be used.

#### Cluster 1: Expert professional practice: overview of the cluster

A fundamental role, as an expert in medicines and pharmaceutical care, is to provide support and advice to patients to improve health outcomes. To be able to offer the best possible care there will be a need to routinely draw on all professional skills and knowledge, and use appropriate reasoning, judgement and professional autonomy to make safe and effective decisions.

#### Possible examples:

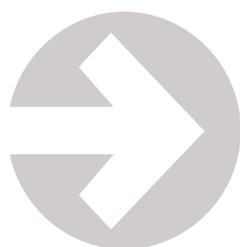
- Direct relationship with a patient, providing individually tailored care for a rare or serious condition(s)
- Using PGDs to help certain patient groups
- Implementing PGDs
- Developing, implementing and reviewing SOPs
- Using guidelines and protocols (e.g. NICE, SIGN, MHRA).

#### Cluster 2: Collaborative working relationships: overview of the cluster

All pharmacists need to be able to demonstrate good communication skills that effectively establish and maintain the co-operation and engagement of patients, colleagues, professional individuals and groups.

#### Possible examples:

- Motivating a multidisciplinary team to adopt a new way of managing and recording health records



**'An assessment that considers a pharmacist's professional development and advanced practice via a portfolio approach is the route to achieving Faculty membership'**





Peer input forms a key element of the assessment for Faculty membership

- Collaborating with other professionals on patient care or introducing new services (e.g. other pharmacists, pharmacy support staff, GPs, dentists, nurses, care home workers)
- Presentation skills when pitching to gain funding for a new service.

**Cluster 3: Leadership: overview of the cluster**

The term “leadership” is often misunderstood. Many people believe that a leader must be a senior manager, yet most pharmacists already lead in their day-to-day practice. Consider examples of projects, in particular the aspects

where personal involvement delivered leadership so that the outcomes were achieved.

**Possible examples:**

- Carrying out a clinical governance review
- Motivating oneself and the pharmacy team to pilot a new pharmacy service
- Working with professional bodies.

**Cluster 4: Management: overview of the cluster**

Management involves:

- Implementing national priorities
- Utilising resources effectively



**Reflection exercise 3**

Use the six clusters to identify key events or achievements over the past five years in your career that would provide evidence of your professional development and advanced practice.

- Managing a project, risks, performance, change
- Being able to think strategically
- Working outside boundaries.

It extends to work-based projects and team management as a career progresses. It is inevitable that management skills will need to be developed further as any responsibility and/or scope of influence increases, because more advanced roles will include organising and delivering service objectives in a timely fashion, including managing others.

**Possible examples:**

- Taking responsibility for people management and performance review
- Managing finances and budgets
- Implementing and using SOPs
- Conforming to regulatory standards and preparing the team for the new GPhC inspection process
- Planning, designing, managing and evaluating a project, such as a private travel health clinic.

**Cluster 5: Education, training and development: overview of the cluster**

Being able to educate, train and develop others is an essential part of being a pharmacist, particularly as more advanced roles are taken on and an individual becomes more responsible for supporting others. Effective education, training and development are necessary to enable the workforce (and future workforce) to develop in the best ways possible and improve the quality of services and outcomes for patients.

**Possible examples:**

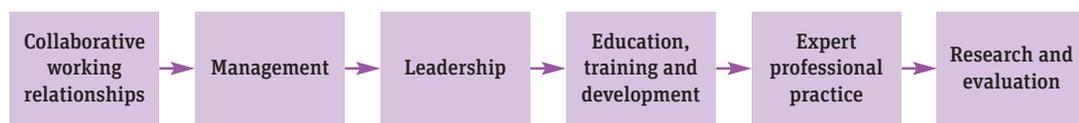
- Being responsible for the professional development of others, including healthcare assistants, pharmacy technicians, other team members and pre-registration pharmacists
- Supporting the training of young doctors,



**Figure 3: Stages of advanced practice**

<b>Advanced Stage I</b> Established, experienced practice	Established in a role, performing well, advanced beyond foundation years or at stages of specialisation and advancement beyond early years
<b>Advanced Stage II</b> Excellent practice	An expert in an area of practice; experienced. Routinely manages complex situations and a recognised leader locally/regionally
<b>Mastery</b> Exceptional practice	Aligned to a recognised leader in community or primary care; corporate level practice in NHS; equivalent leads in academia; business/corporate leadership roles in industry; business or strategic leader in community. A nationally recognised leader in an area of expertise (often internationally), alongside a breadth of experience and expertise

**Figure 4: An example of an approach to building a Faculty portfolio by clusters**



dentists, nurses and other healthcare professionals

- Mentoring a colleague
- Being a NVQ/SVQ assessor
- Facilitating the development of others, including projects where you personally delivered education or training to ensure that the project was successfully delivered, such as assisting with a CPPE, NES or WCPPS learning event.

**Cluster 6: Research and evaluation: overview of the cluster**

Research and evaluation can be as simple as conducting an audit as stipulated in the NHS contract, but can also take the form of a post-graduate qualification with a research element, such as a PhD. Research and evaluation skills are essential for pharmacists working at advanced stages, developing enquiry-driven services that improve quality and outcomes.

**Possible examples:**

- Reviewing clinical literature and identifying gaps in the current evidence base for use of a new medicine
- Advising patients on the use of products that have a limited evidence base, such as electronic cigarettes, homeopathic remedies or vitamins that make unsubstantiated health claims
- Actively auditing the practice (or collating data about a local service and feeding back to colleagues locally)
- Supervising the team and pre-registration trainees with an audit project
- Contributing to research via completion of study questionnaires.

**Reflection exercise 4**

Think about an activity or project that you have completed recently. Write a short paragraph summarising what the activity/project involved, what happened and what the outcome was. Then think about the Faculty clusters and try to match up the descriptors to the evidence.

**Step 2: Sorting evidence into Faculty clusters**

Choose one cluster and gather all evidence relating to that cluster before moving onto the next. If you have never built a portfolio before and want to begin with some of the more straightforward clusters, see the example of an approach illustrated in Figure 4 (above).

**Step 3: Adding evidence into a Faculty portfolio**

This involves writing evidence into the 'Entry' page of the portfolio, then linking or mapping it to the different clusters of the portfolio and to

one of the different stages of each competency (Advanced Stage I, Advanced Stage II or Mastery).

Figure 5 (below) shows an example of the entry page of the portfolio where evidence is recorded and outlines the type of details required for the different fields. Tips when writing an entry include:

- Write as much as is needed in the description and summary sections to give an overview of the evidence and how it maps to the competencies. The word count suggested is only a guide.
- Use bullet points and write clearly and concisely
- Don't use acronyms
- Clearly demonstrate to the assessors how the evidence shows achievement of the stage of development being mapped to (this can be explained or reflected on in the Impact section).

Once the fields are completed, the entry must be linked or mapped to the clusters and

**Figure 5: Example of a portfolio entry page**



competencies of the portfolio. Figure 6 shows the portfolio mapping page.

The process of building a portfolio is then repeated by adding different pieces of evidence to the entry page and mapping to the clusters and competencies until all the clusters have been covered.

Let's look at two examples of situations that often occur in a community pharmacy setting, which can provide excellent evidence for a Faculty portfolio.

Please note that these examples are not comprehensive and may not be relevant to all community pharmacists.

**Example 1: Implementing changes in controlled drug legislation to pharmacy practice, such as the reclassification of tramadol in December 2014**

Suggested mappings to clusters in the Faculty portfolio:

- Expert professional practice, as there will be a demonstration of knowledge of the new controlled drug legislation
- Collaborative working relationships, as there will be a need to communicate this effectively to the pharmacy team and other healthcare professionals so they are aware of the changes and how they might impact on their practice
- Management, as there may be a need to manage risks around the new changes and ensure that amendments to SOPs are effectively implemented

**Figure 7: Peer testimonials**



- Education, training and development, as it may be required to train support staff about the changes to procedures, storage and record requirements, and supply arrangements.

**Example 2: Supervising and training a pre-reg pharmacist during his/her cross-sector placement**

Suggested mappings to clusters in the Faculty portfolio:

- Collaborative working relationships, as there may be a need to use effective communication skills (listening, providing reassurance) to develop a good working relationship
- Leadership, as there may be a need to motivate the pre-reg trainee through the

**Reflection exercise 5**

Look at the evidence you have identified that would demonstrate advanced practice. Which colleague would be able to provide a testimonial to support your evidence?

- weeks they are spending in the pharmacy
- Management, as there may be an occasion when management of his/her performance is required and there is a sign-off for relevant GPhC competencies. Management of time may be required, such as changes to rotas and finding additional cover for the team, so that the trainee has time to learn
  - Education, training and development, as there will be on-the-job training for the pre-reg about OTC medicines, the NHS contract and other aspects of community practice.

**Peer testimonials**

The second component of the Faculty assessment is peer review. A minimum of two Faculty peer testimonial forms must be submitted but routinely, in line with best practice, another two or three referees would be expected, including colleagues, external contacts and employers, who can support the portfolio with a reference or supporting letter.

- Examples of peers include:
- GPs, nurses, dentists and other health and social care professionals
  - Other pharmacists within and outside the

**Figure 6: Mapping entries against Faculty clusters**

Map entry against the framework

To map your entry against a competency please click on the relevant cluster below.

- 1. Expert Professional Practice**
  - 1.1. Expert Skills and Knowledge
 

<b>Advanced Stage I</b> <b>Map now</b>	<b>Advanced Stage II</b> <b>Map now</b>	<b>Mastery</b> <b>Map now</b>
Demonstrates general pharmaceutical skills and knowledge in core areas.	Demonstrates in-depth pharmaceutical skills and knowledge in defined area(s).	Advances the knowledge base in defined area(s).
In addition for patient focussed roles: Is able to plan, manage, monitor, advise and review general pharmaceutical care programmes for patients in core areas.	In addition for patient focussed roles: Is able to plan, manage, monitor, advise and review in-depth/complex pharmaceutical care programmes for patients in defined area(s).	In addition for patient focussed roles: Advances in-depth/complex pharmaceutical care programmes for patients.
  - 1.2. Delivery of Professional Expertise
  - 1.3. Reasoning and Judgement
  - 1.4. Professional Autonomy
- 2. Collaborative Working Relationships**
- 3. Leadership**
- 4. Management**
- 5. Education, Training and Development**
- 6. Research & Evaluation**

**Figure 8: Membership certificate**



**Figure 9: Faculty stages, descriptions and post-nominals**

Faculty stage	Faculty post-nominals
Advanced Stage I Established, experienced practice	MFRPSI
Advanced Stage II Excellent practice	MFRPSII
Mastery Exceptional practice	FFRPS

applicant's organisation (e.g. colleagues in primary care, the superintendent pharmacist, a colleague who works alongside the person)

- Pharmacy technicians and other pharmacy support staff members
- Recently qualified pharmacists, pre-reg pharmacists and undergraduate MPharm students who have been tutored and/or supervised by the applicant
- Non-pharmacy colleagues within the organisation (e.g. area, line or team manager)
- Mentees or own mentor(s).

### Expert practice assessment

Expert practice assessment is the third component of the Faculty assessment and, depending on the length of time post-registration, there are two options:

- Pharmacists with 10 years or more post-registration should provide a current CV
- Pharmacists with two to 10 years post-registration must provide a CV and demonstrate their practice assessment via a case-based discussion (CbD) review and undergo an oral peer assessment. Oral assessment allows members to fully demonstrate their knowledge, skills and values in relation to the area in which they are practising.

### Faculty assessment

Once the three components have been completed, they should be submitted online for assessment. This is carried out by two trained and quality assured Faculty assessors (randomly selected) who will evaluate the evidence and award the relevant Faculty stage (Advanced Stage I, Advanced Stage II or Mastery).

Results of all assessments are ratified by the Credentialing Panel to ensure that processes have been followed and standards applied correctly.

The assessors will review all three components of the submission to gain a clear picture of the applicant's achievements, so it is important that the best evidence is showcased.

The CV component gives the assessors an insight into the applicant's career to date and helps them understand their scope of practice. For this reason, we would encourage applicants to give brief details of all roles they have undertaken.

The assessor will then review the portfolio taking into account the peer testimonials to get a complete picture of the applicant's scope of practice before arriving at a final decision.

### Assessment submission dates 2015

A pharmacist can submit a portfolio any time throughout the year for assessment. The Faculty assessors will be meeting on the following dates in 2015 to carry out the assessments:

- April 26
- October 24.

### The outcome of a Faculty assessment

Once the assessors have awarded the relevant Faculty stage and corresponding post-nominal, a bespoke professional development plan will be issued (see example in Figure 10). This contains a breakdown of the portfolio clusters, detailing where there is strong evidence to demonstrate

the stage and areas where the applicant may not have sufficiently demonstrated a stage. Along with the post-nominals, a RPS Faculty certificate will be awarded.

### Post-nominals

The post-nominals can be used where appropriate (e.g. on a CV, business cards, name badges, personal stationary). The post-nominal is valid for five years, at which point the Faculty member will have to be re-assessed to maintain his/her status. During that time members will be expected to keep their portfolio up to date and will have access to all the Faculty resources.

### Reflection exercise 6

Make a commitment to join the RPS Faculty and develop an action plan to include:

- Registering on one of the monthly RPS webinars via RPS Events
- Accessing the Faculty portfolio, resources and tools on the RPS website
- Identifying key events and evidence from your career
- Seeking guidance and support from Faculty members or champions in your area or company



Pharmacy Magazine's CPD modules are available on Cegedim Rx's PMR systems, Pharmacy Manager and Nexphase. Just click on the 'Professional Information & Articles' button within Pharmacy KnowledgeBase and search by therapy area. Please call the Cegedim Rx helpdesk on 0844 630 2002 for further information.



Use this form to record your learning and action points from this module on the RPS Faculty and include it in your CPD portfolio and record online at [www.uptodate.org.uk](http://www.uptodate.org.uk). Any training, learning or development activities that you undertake for CPD can also be recorded as evidence as part of your RPS Faculty practice-based portfolio when preparing for Faculty membership. So start your RPS Faculty journey today by accessing the portfolio and tools at [www.rpharms.com/Faculty](http://www.rpharms.com/Faculty)

THE RPS FACULTY

# assessment questions

- Within the Faculty there are three stages of development. Which statement best describes Advanced Stage I?
  - Exceptional practice
  - Excellent practice
  - Established and experienced practice
  - Established practice
- Which statement is TRUE? The Faculty practice-based portfolio is:
  - A collection of courses or qualifications completed
  - Based on six clusters and 34 competencies
  - Paper-based
  - Based on clusters that have two competencies
- Faculty membership is achieved by:
  - Completing an online form
  - Taking an examination
  - Undergoing an assessment by Faculty assessors
  - Being a member of the RPS
- Which statement is TRUE? The Faculty is:
  - A professional recognition programme
  - A professional regulation programme
  - A professional curricula programme
  - A professional accreditation scheme
- Which is NOT a cluster of the Faculty portfolio?
  - Leadership
  - Expert professional practice
  - Stock procurement
  - Research and evaluation
- Advanced Stage II is denoted by which post-nominal?
  - FFRPS
  - MFRPS
  - MFRPSI
  - MFRPSII
- The Faculty post-nominals are valid for:
  - 12 months
  - 24 months
  - 36 months
  - 60 months
- What is the purpose of a professional development plan?
  - Notification of a pharmacist's stage of professional development
  - Evidence of a pharmacist's post-nominals
  - Bespoke feedback
  - Overview of a pharmacist's professional achievements

Activity completed. (Describe what you did to increase your learning. Be specific)  
*(ACT)*

Date:

Time taken to complete activity:

What did I learn that was new in terms of developing my skills, knowledge and behaviours? Have my learning objectives been met?\*

*(EVALUATE)*

How have I put this into practice? (Give an example of how you applied your learning). Why did it benefit my practice? (How did your learning affect outcomes?)

*(EVALUATE)*

Do I need to learn anything else in this area? (List your learning action points. How do you intend to meet these action points?)

*(REFLECT & PLAN)*

\* If as a result of completing your evaluation you have identified another new learning objective, start a new cycle. This will enable you to start at Reflect and then go on to Plan, Act and Evaluate. This form can be photocopied to avoid having to cut this page out of the module. You can also complete the module at [www.pharmacymagazine.co.uk](http://www.pharmacymagazine.co.uk) and record on your personal learning log

**ENTER YOUR ANSWERS HERE** Please mark your answers on the sheet below by placing a cross in the box next to the correct answer. Only mark one box for each question. Once you have completed the answer sheet in ink, return it to the address below together with your payment of £3.75. Clear photocopies are acceptable. **You may need to consult other information sources to answer the questions.**

- |    |                             |    |                             |    |                             |    |                             |    |                             |    |                             |    |                             |    |                             |
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Name (Mr, Mrs, Ms) \_\_\_\_\_

Business/home address \_\_\_\_\_

Town \_\_\_\_\_ Postcode \_\_\_\_\_ Tel \_\_\_\_\_ GPhC/PSNI Reg no.

I confirm the form submitted is my own work (signature) \_\_\_\_\_

Please charge my card the sum of £3.75 Name on card \_\_\_\_\_  Visa  Mastercard  Switch/Maestro

Card No. \_\_\_\_\_ Start date \_\_\_\_\_ Expiry date \_\_\_\_\_

Date \_\_\_\_\_ Switch/Maestro Issue Number \_\_\_\_\_

**Processing of answers**  
Completed answer sheets should be sent to Precision Marketing Group, Precision House, Bury Road, Beyton, Bury St Edmunds IP30 9PP (tel: 01284 718912; fax: 01284 718920; email: [cpd@precisionmarketinggroup.co.uk](mailto:cpd@precisionmarketinggroup.co.uk)), together with credit/debit card/cheque details to cover administration costs. This assessment will be marked and you will be notified of your result and sent a copy of the correct answers. The assessors' decision is final and **no correspondence** will be entered into.