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RESEARCH ARTICLE

What capabilities are required for facilitators to support student pharmacists effectively during experiential learning (EL) in Scotland? – Part 2

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Abstract

Background: A key outcome of the changes to the Standards for Initial Education and Training of Pharmacists in Great Britain is to increase the quantity and quality of Experiential Learning (EL) in the MPharm programme. A companion paper described the development of a framework of essential capabilities required of EL facilitators to support quality EL. The aim of this paper was to establish the views of pharmacy stakeholders on the capability framework and suggest further development and potential uses in practice. **Methods:** Three focus groups were used to gather the views of pharmacy stakeholders with experience in delivering experiential learning. The focus groups were transcribed and analysed using thematic content analysis. **Results:** The themes from the focus group were categorised into five areas: 1) Overall views of the framework; 2) Perceived reasons for descriptors not reaching consensus; 3) Challenges of using the framework; 4) Potential developments of framework; and 5) Potential uses of the framework in practice. **Conclusion:** Given the current changes in the initial education and training of pharmacists, this research provides evidence of the value the framework provided on the role of an EL facilitator while outlining the need for refinements to encourage acceptability by stakeholders.

Introduction

Over the last decade, pharmacists' initial education and training in Great Britain have undergone substantial changes, and this transformation is still unfolding with the redevelopment of the Standards for the Initial Education and Training of Pharmacists (General Pharmaceutical Council [GPhC], 2021). These changes are required to enable pharmacists to take on more enhanced and advanced roles to support the health and care of patients, aligning with the strategy for pharmaceutical care outlined by the Scottish Government (Scottish Government, 2017).

One pivotal evolution is increasing the amount of experiential learning (EL), a powerful and proven evidence-based approach to learning and teaching (Kolb, 1984), highlighting that adults learn best through experience in practice. The benefits of incorporating EL into pharmacy education are well documented (Hendry *et al.,* 2016; Winn & Turner, 2016; Jacob *et al.,* 2021). These studies have demonstrated that EL is a fundamental learning tool in preparing student pharmacists for practice and developing their competence and confidence.

Increasing the quantity and quality of EL in the MPharm degree is fundamental to the evolution of initial education and training for pharmacists. The Scottish Government has committed to supporting the increase of both the quantity and quality of EL through the introduction of Additional Cost of Teaching in Pharmacy (ACTp) funding (NHS Education for Scotland, 2023). With the introduction of this funding, NHS

Education for Scotland, in collaboration with the two Scottish Schools of Pharmacy (University of Strathclyde and Robert Gordon University), is responsible for ensuring quality EL for all student pharmacists studying in Scotland. The literature emphasises the importance of the facilitator who supervises student pharmacists during their EL in ensuring the quality of EL (Jacob & Boyter, 2020a; Jacob & Boyter, 2020b). Therefore, evidence calls attention to the need for the facilitator to be trained appropriately and to have a clear understanding of the requirements of their role (Jacob & Boyter, 2020b; Jacob *et al.,* 2021).

A complementary article detailed the creation of a framework outlining the capabilities and descriptors required for EL facilitators (Hamilton *et al.,* 2023). The identified eight overarching capability areas crucial for facilitators supporting the EL of student pharmacists comprised the facilitators' personal and professional practice, role modelling, learning organisation, learning environment, learning relationships, learning facilitation, learners' assessment, and facilitators' development (Appendix A).

It is essential to examine the results of the Delphi process to guide the development of the facilitator capability framework. Therefore, this study aimed to explore the views of Delphi participants regarding the framework development and the rationale behind including and excluding descriptors. It also sought to guide the continued refinement and implementation of the framework.

Methods

Design

Focus groups were selected to gather stakeholder views on the facilitator capability framework. This choice aligns with literature indicating that focus groups provide an opportunity to gain insight and understanding into how the framework would be perceived by stakeholders in practice (Barbour, 2005).

The sample consisted of pre-registration trainees (now trainee pharmacists in their Foundation Training Year), pharmacist facilitators, academic pharmacists, and health board education and training leads. Participants were asked in the final round of the Delphi process for the framework development if they would be willing to participate in a focus group. All willing participants were emailed and asked to complete the focus group information sheet and consent form.

The focus groups comprised a representative sample of members from each of the stakeholder groups, where possible, aiming for an optimal six members in each focus group (Stalmeijer *et al.,* 2014). Three focus groups were undertaken before the saturation of patterns and themes occurred (Barbour, 2007).

A discussion guide was developed based on the study aims to help guide the discussion in the focus group and guarantee consistency across all three focus groups (Stalmeijer *et al.,* 2014). It facilitated continuity of data collection and ensured meaningful analysis of the data. The discussion guide was reviewed by an expert panel of three experienced academic pharmacists (AP, ACB, BA) with significant experience in experiential learning to ensure it was fit for purpose. As a final validation process, it was piloted with a small sample of participants (n=3). These results were not included in the analysis.

Due to social distancing restrictions caused by the COVID-19 pandemic, the focus groups were held and recorded through Microsoft Teams®, with participants' agreement. The focus groups lasted 60 minutes on average and were facilitated by the lead researcher (PH). The recordings were transcribed verbatim and analysed using thematic content analysis, which provided a flexible, systematic, and transparent approach to the data analysis (Braun & Clarke, 2006). The transcriptions and analysis were reviewed by a colleague to review and ensure interpreter rigour (Kitto *et al.,* 2008).

Ethical Approval

The University of Strathclyde and Robert Gordon University confirmed that ethical approval would not be required for this research. Ethical approval was sought from the University of Dundee due to the research being completed as part of a Master of Medical Education (MMED) Course and was subsequently approved (SMED REC Number 20/ 22).

Results

Overall, 17 participants attended one of the three focus groups that were held from November to December 2020 (Table I). All participants contributed to the discussion in the focus group they attended.

Table I: Demographics of focus group participants

	Focus group participant numbers
Pre-registration pharmacists	2
Experiential learning facilitator	6
Academic pharmacist	5
Health board education and training lead	4
Total	**17**

Qualitative data from the focus groups were categorised into five main themes: 1) Overall views of the framework from participants; 2) Perceived reasons for descriptors not reaching consensus; 3) Challenges of using the framework; 4) Potential developments of the framework; and 5) Potential uses of the framework in practice. Table II outlines these key themes and subthemes with some illustrative quotes.

Table II: Themes, subthemes, and illustrative quotes from focus group discussions

Theme	Subtheme	Illustrative quote
Overall views of the framework	Positive views	• "*It represents a really good dissection of the qualities and skills and attributes that you're expecting from a facilitator…*" (EL Facilitator) • "*It's a really positive move and I think it's really good to lay out exactly what is required of the facilitators.*" (Academic Pharmacist) • "*…it's quite nice to have an overview of where the bar is, and where the breadth of that job is*." (Educational Lead)
	Structure	• "*…What I quite like about it, is the way it's broken down into the different groups of criteria. I thought that made it a little bit more user-friendly because it is quite overwhelming at first, just with the list of all the different factors…*" (Academic Pharmacist)
	Concerns	• "*I think, that comes through on it, which you're seeing about coming to it as a new facilitator, I'm not sure that you would necessarily jump in, given your other work commitments*." (EL facilitator) • "*The only concern that I have is that some of the descriptors that we looked at are suggesting that you need to be a particularly experienced pharmacist and inputting into specific areas of practice*" (Academic Pharmacist)
Rationale for descriptors not meeting consensus	Beyond the facilitators role	• "*…prepare for their assessments and mentor students beyond their EL. That's not something that I would have considered would be expected of me as an experiential learning facilitator. It's just a bit beyond the scope, so I can see why that didn't make the cut*." (EL Facilitator) • "*… we wouldn't expect the facilitators to be referring to various, it just comes back to the university and then we deal with that side of it*." (Academic Pharmacist)
	Descriptor unable to be measured	• "*The reason why I probably didn't rate that was because that's completely subjective about how you can actually measure that you've inspired someone*." (Academic Pharmacist)
	Language	• "*I think it was maybe the wording that made… What he's saying we would have a chat and talk about what we're going to do, which is an educational contract, but maybe people thought it was more formal than that and it was a written down thing*" (Pre-registration Trainee)
Challenges	Time constraints	• "*I think in an ideal world, it's all very good but I think we're seeing a huge volume of students coming through our hospital because of our location, that actually, we're not having the time to do a lot of these very individualised placements. And it's, get them through, get them seen, get them something. And our facilitators are not having the time to spend on it that we would like them to have*." (Educational Lead) • "*…the massive variety in placement links and types, is something maybe that I didn't consider at first for this. But there's definitely things here that maybe a half a day's placement, you're just not going to get anywhere near. And if somebody was reading this and thinking, wow, I've got to do all of this for every student pharmacist that's coming through, I can see them maybe being a little bit reluctant to take on that role*." (Academic Pharmacist)
	Interpretation of the capabilities	• "*I think one of the challenges is that you've got three different perceptions of it. You've got the student's perception and you've got the university's perception and you've got the facilitator's perception of what those phrases mean. And I don't know how to manage that so that they all mean the same thing to all three people*." (EL facilitator)
	Providing context and dissemination	• "*On the face of it, it looks like quite a lot, so you'd have to put them in their correct context*." (Educational Lead) • "*And it's important that we get it to the facilitators themselves and it doesn't get trapped at the level above that, where they all think that the facilitators are up to speed with it, but it's actually not filtering down*." (Academic Pharmacist)

Theme	Subtheme	Illustrative quote
		• "*I think that realistically achieving all of this at any one time is not realistic. So, that would really play into how it was introduced and how it was discussed*" (Academic Pharmacist)
Further developments	Presentation of the framework	• "*I think that you could almost have the capability domains as the, was it eight key, phrases that you want the facilitators to see, and then the descriptors underneath would be examples of what that entails almost*." (Academic Pharmacist) • "*I think one of the ways that we can potentially help this process on is maybe with an illustration under the different descriptors, So what this actually looks like*." (EL Facilitator)
	Reduction in size	• "*I think, yes, definitely if they could be condensed it would be less intimidating and a little bit more useful*." (Academic Pharmacist) • "*…trying to condense it as much as possible would be a good idea. But we still need to strike a balance between condensing it and leaving things out that are important is obviously a difficult balance to try and strike*." (EL Facilitator)
	Ongoing development	• "*I suppose just coming back to the point of looking at it from the here and now versus looking at it in five years. We don't want just something for the here and now because we're trying to move on and have a better model where they are getting more EL. And they are potentially spending more time with the facilitators on an ongoing basis, so it's building up*". (Academic Pharmacist)
Uses	Identify further development and training needs of facilitators.	• "*I think, for me, it comes back to, it's the whole marriage between the expectations of the facilitator and the expectations of the student themselves, and the agreement between them*." (Trainee Pharmacist) • "*I probably think that there's more work to be done in terms of allowing facilitators more of an insight into both of the courses. And how the EL fits with both of those courses in terms of some of the curriculum stuff*" (Academic Pharmacist)
	Appraisal tool for facilitators	• "*I wonder, was it something you were seeing as a self-assessment tool for individuals who are already in the role and maybe forming the basis of an appraisal type process*" (Educational Lead) • "*I think this framework would be great just to formalise the whole process of EL and lay down our benchmark. And just to say from a student's perspective, I certainly had some very varying levels of quality in EL placement I had. Some were just fantastic and some you could tell you were just almost a nuisance, it felt like. So, I think to standardise the whole thing and bring people up to a certain bar would be really helpful for a student*." (Trainee Pharmacist) • "*Some people … still haven't even hosted a student or even been involved in placement. So I think if it was a bit more robust like this at the beginning, then we probably would have the right people involved from the start*"
	Other uses	• "*Facilitators would transition to pre-registration Training and then in a foundation training. But if we do get to the point that it's seen as a similar framework and usable, then I think that would be good for us implementing it and getting used to it*."

Theme 1 – Overall views of the framework

There was a positive reaction to the development of this framework, highlighting that it provided clarity to stakeholders around the expectations of EL facilitators. Participants mentioned that facilitators wanted more guidance around their role, and this framework provided this. EL facilitators endorsed the rationale for the framework:

> *"I think it's a positive step to have some guidance on the roles and responsibilities of the facilitators. I actually found it quite helpful reading through it. … it gave me some ideas of other things that I maybe wasn't consciously doing." [Experiential Learning Facilitator]*

and,

> *"It's quite nice to have an overview of where the bar is, and where the breadth of that job is. Because if you asked to be a facilitator, you go to Preparation for facilitation of Experiential Learning (PFEL) training and you get some information. But there are things on here that probably I hadn't thought of, and I bet other facilitators wouldn't maybe appreciate. So, it just gives you an overview of all the things that they might want to be considering in their practice and how it links into it. I think it's useful from that point of view to define that." [Health Board Education and Training Lead]*

Many participants appreciated the user-friendly structure of the framework, with the capability domains covering all essential aspects of the EL facilitators' role. Participants commented that similar frameworks would be helpful for other educational programmes, such as pre-registration and post-registration programmes.

There were some concerns about the size of the framework and that it could be overwhelming for facilitators. Participants felt that the wording of some of the descriptors put the responsibility on the facilitator, whereas the wider pharmacy teams could be used to facilitate student learning. They suggested that this might reduce the acceptability of the framework and result in some pharmacists not taking on the role of facilitator. There was general agreement that the framework could be condensed by combining descriptors, which could increase engagement with stakeholders.

Theme 2 – Perceived reasons for descriptors not reaching consensus

Further clarity around why some of the descriptors did not meet consensus in the Delphi was provided through analysis of the focus groups. Three main reasons were identified.

• Beyond the facilitator role – Some descriptors were perceived to be the role of universities, training providers, or students and not the specific role of the facilitator. These included:

> *"Facilitators comply with professional and their organisations performance management policies"*

and

> *"Facilitators serve as a mentor to student pharmacists beyond their EL placement".*

• Measurability – Some descriptors were believed to be hard to measure and perceived as unsuitable for this type of framework. These included:

> *"Facilitators contribute to the development of others as educators"*

and

> *"Facilitators stimulate the best in each student pharmacist".*

• Duplication – Participants felt that some descriptors were covered elsewhere in the framework and thus should be removed. These included:

> *"Facilitators inspire student pharmacists through modelling excellent professional behaviours",*

and

> *"Facilitators stimulate the best in each student pharmacist".*

Theme 3 – Challenges of using the framework

Several challenges to using the framework were identified, the most common being the time constraint to demonstrate the descriptors as shown by:

> *"I think in an ideal world, it's all very good but I think we're seeing a huge volume of students coming through our hospital, that actually, we're not having the time to do a lot of these very individualised placements. And it's, get them through, get them seen, get them something. And our facilitators are not having the time to spend on it that we would like them to have." [Experiential Learning Facilitator]*

Time constraints were mainly due to the workload of facilitators and the short duration of some placements, making it difficult to demonstrate the descriptors. Another challenge was how different stakeholders interpret the descriptors, which could cause a difference in expectations. Other comments were related to how the framework would be applied in practice. For example, it needs to be user-friendly for ease of use and should not increase the workload of the facilitator.

Theme 4 – Potential further developments of the framework

Several suggestions were made to reduce the size of the framework through removing duplication or combining descriptors.

Other suggestions were related to the presentation of the framework, such as presenting it as overall capability domains, separating the descriptors into essential and desirable, and providing illustrators to demonstrate what the descriptor means in practice. All focus groups emphasised the importance of clarifying the purpose of the framework and how it should be used.

Ensuring the framework was freely and easily accessible was deemed crucial. Several participants highlighted the need for continuous development of the framework to align with the evolving nature of EL in Scotland.

Theme 5 – Potential uses of the framework in practice

During the focus groups, participants described potential uses for the framework. These were:

• Demonstrating and developing the quality in EL placements, as illustrated in the comment below:

> *"from a student's perspective, I certainly had some very varying levels of quality in EL placement I had. Some were just fantastic and some you could tell*

you were just almost a nuisance, it felt like. So, I think to standardise the whole thing and bring people up to a certain bar would be really helpful for a student." [Trainee pharmacist]

This statement describes the framework as a method of outlining the expectations and setting a standard for both the student pharmacist and the facilitator. One comment described it as the start of a process for developing recognised training practices. Other observations acknowledged that the framework could benefit organisations participating in EL as it allowed them to identify and support their employees when undertaking the facilitator role.

• Identifying training needs – One of the uses recognised in all focus groups was that the framework helps facilitators identify their individual training needs. It also helps organisations identify where there are collective training needs. Examples of training needs highlighted by the participants included leadership, assessment, clarity of the university course content, and providing feedback.

• Appraisal and self-assessment – Participants noted that the framework could serve as a tool for self-reflection or appraisal. Some suggested it could be used as part of a peer review session. They highlighted the need for continual investment and support for the facilitators to ensure that quality continues to evolve as EL develops, as illustrated in the quote below:

"We don't want just something for the here and now because we're trying to move on and have a better model where they [student pharmacists] are getting more EL. And they are potentially spending more time with the facilitators on an ongoing basis, so it's building up." [Academic pharmacist]

Discussion

Focus groups serve to help researchers understand the views and social contexts of individuals who will use the framework in practice. The development of this framework used multiple research methods, which would ensure the acceptability, accessibility, and accuracy of the resultant framework (Marrelli *et al.,* 2005; Batt *et al.,* 2019). The focus groups provided a method to explore participants' views of the framework and any further developments and use in the future.

Focus groups were chosen rather than interviews, as they encourage further discussion between group members and help engage quieter group members in the process (Vaughn *et al.,* 1996). Opting for mixed stakeholder focus groups aimed to promote diverse perspectives, with participants from different stakeholder groups considering the framework from various angles. However, it is crucial to acknowledge that the mixed group could have influenced individual contributions. Therefore, it was essential for the facilitator of the focus groups to create a safe environment for discussion (Stalmeijer *et al.,* 2014).

One of the main themes identified was the clarity that the framework brought to the role of an EL facilitator. This clarity was seen as beneficial for EL facilitators and for designing training programmes for future EL facilitators.

Several themes emerged for improving the framework; the first was related to the size and perceived overlap of some framework descriptors. The main concern was that the framework felt burdensome and added to their already heavy workload. Suggestions were made for removing duplicate and overlapping descriptors to reduce the framework length and increase acceptability and engagement. Leadership skills, providing feedback, and standards of a pharmacy professional were areas of duplication that could be refined. Other suggestions regarding groupings of "essential" and "desirable" descriptors merit further discussion to ensure ease of use and engagement from stakeholders. Some descriptors were removed because they were perceived as hard to measure, limiting their understanding by stakeholders, making their application in practice challenging, and resulting in a lack of engagement with the framework. Further iterative consultation with a broader group of stakeholders will help refine the framework to increase the acceptability and future use. Researchers had previously applied this approach to increase the validity of their framework (Srinivasan *et al.,* 2011; Barry *et al.,* 2012).

The challenge of engaging with and implementing this framework was the limited time to undertake the facilitator role and the associated workload. This challenge is also common in supervising learners in practice (Kilminster *et al.,* 2007; Knott *et al.,* 2020), highlighting the need to balance between facilitator development and their workload demands. Creating a culture where the entire pharmacy team views the supervision of learners as an integral aspect of their roles is crucial for supporting continuous development. Further consultation with stakeholders is essential to identify the most appropriate methods of implementation of the framework to maximise engagement and use among facilitators. The use of a framework can lead to efficient use of educational resources and enables facilitators to tailor their

development to their specific requirements (Srinivasan *et al.,* 2011; Tofade *et al.,* 2015).

Another implementation concern is the dissemination of the framework to the current workforce, underlining the value of ensuring that the framework is accessible to all facilitators and EL stakeholders. Notably, stakeholders emphasised the necessity of providing clear instructions and context for using the framework and how it should be applied. Outlining the benefits and relevance of this framework to facilitators is expected to foster their engagement. Maintaining regular communication with facilitators during the initial implementation phase would help identify any issues that may arise.

During the focus groups, participants expressed that the current training for EL facilitators covered many areas of the framework but highlighted the benefits of some additions to the current training package. These additions include facilitator leadership skills, feedback to students, and workplace-based assessments. While acknowledging the prospective benefits of further training in these areas, additional research is warranted to determine the full extent of these needs.

The main point raised by participants was that facilitators needed to better understand the structure of university courses, the level of skills pharmacy students should have when undertaking EL, and the learning outcomes to be achieved during EL. The current diversity of curricula across the two Scottish schools of pharmacy risks creating confusion about what is expected during EL. Standardising the learning outcomes for EL would help clarify the requirements for EL and streamline training in this area.

Several potential uses for the framework were highlighted. Defining facilitator expectations helps in recruiting and developing new facilitators as it explains and clarifies their role before they commit to hosting a student pharmacist. It also improves the understanding of this role by organisations hosting students and assists these organisations in identifying the most appropriate pharmacists to train as EL facilitators.

Evidence demonstrates the utility of the framework for the development, analysis, and assessment of pharmacists as facilitators (Batt *et al.,* 2019). Subsequently, through effective utilisation and application of the framework, organisations gain a structure to ensure meaningful appraisal and identification of personal development plans for facilitators.

This framework could enable organisations to identify shared training needs, feeding into the initial training and further upskilling of facilitators. This method of using resources to develop facilitators is common and efficient (Srinivasan *et al.,* 2011; Walter *et al.,* 2018).

Future applications include using the framework to recognise facilitators who have demonstrated capabilities, in line with a similar process for recognising medical trainers in undergraduate medical education through evidence mapped against aspects of the Academy of Medical Educator (AOME) competency framework (Napier & Khogali, 2019). This utilisation would allow the production of an approved list of competent EL facilitators in Scotland, with formal recognition of their input into the development of student pharmacists.

Strengths and limitations

This study's strength is that it involved the two Scottish Schools of Pharmacy and practitioners from various practice settings across Scotland. Another strength was using three different methods to develop the framework, which provided rigour to the methodology and acceptability of the framework in practice. This sequential mixed method approach was used in previous projects to explore, interpret, and refine the outcomes of the initial phase of research (Dewolfe *et al.,* 2010; Barry *et al.,* 2012).

The low number of participants in the focus groups made it impossible to align these groups with specific stakeholder categories. This constraint might have introduced bias due to the power relationship among the different stakeholder groups (Stalmeijer *et al.,* 2014). This limitation was minimised by the moderator (PH) facilitating the discussion to ensure each participant contributed.

Further research

Further work is required to refine the framework to ensure its acceptability to stakeholders and maximise engagement. A pilot study with a sample of EL facilitators from various sectors of practice, regions, and experience would allow the validation of the framework's content, structure, and acceptability and identify areas for further development.

Undertaking further research to identify how current facilitators and student pharmacists perceive their experience of EL would allow comparison with the capabilities in the framework, supporting the quality management of EL and directing further education for facilitators to enhance their development and improve the quality of EL.

The outcomes could demonstrate that stakeholders had different views on some of the capabilities. Further research to clarify how the stakeholder groups view the framework and role of an EL facilitator and the

differences in the views of stakeholder groups would provide a better understanding of the facilitators' role.

One study (Knott *et al.,* 2020) highlighted the varied composition of training programmes for facilitators in America and the lack of evidence on the evaluation and effectiveness of these programmes. Further research should evaluate the effectiveness of any training to develop areas of this framework.

Conclusions

Fostering quality in EL is essential to developing the initial education and training of pharmacists in the future. A crucial aspect of improving quality in EL involves the support and development of facilitators. This study provided an opportunity to explore participants' feedback on the framework and identify areas for further refinement.

A notable theme emerging from the focus groups was stakeholders' appreciation of the clarity and understanding that the framework provided on the role of EL facilitators. It was also evident that further refinements related to the framework structure and reduction of duplication are necessary to ensure its acceptability. The framework would also support identifying training needs for facilitators and providing a structure for training providers to support facilitator development. These training needs include leadership, assessment strategies, and a better understanding of university courses.

In light of the implementation of the General Pharmaceutical Council's revised Standards for the Initial Education and Training of Pharmacists and the increasing time spent in EL across the UK, this research provides timely support for the development of EL facilitators to enhance the EL experience.

Conflict of interest

The authors declare no conflict of interest.

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Appendix A: Proposed framework

Capability domain	Capability descriptors
A.) Personal and professional practice - Facilitators of EL demonstrate personal and professional values in their practice, clearly demonstrating a commitment to the profession	**Facilitators:** comply with the professional standards set by the General Pharmaceutical Council (GPhC) demonstrate a commitment and passion for the profession demonstrate a commitment to continuing professional development demonstrate an open and adaptable attitude demonstrate non-discriminatory behaviour in their practice display leadership qualities within their workplace display confidence in themselves and their practice inspire and motivate others demonstrate honesty and integrity throughout their practice proactively and appropriately address any conflicts or disagreements develop effective leadership and managerial relationships with colleagues and student pharmacists take responsibility for their actions and practice delegate appropriately ensuring adequate support when required provide high quality patient centred pharmacy services display a compassionate and a caring attitude towards their patients resolve issues using effective critical thinking and problem-solving skills ensure the health, wellbeing and safety of patients and student pharmacists at all times incorporate individuals (patients, healthcare providers, student pharmacists) into the decision-making process, where appropriate demonstrate an ability to see situations holistically maintain professional competence in all situations
	are aware of their own limitations and refer to appropriate colleagues when required engage in quality improvement in their practice and support others in developing quality practice display commitment and enthusiasm to develop others show a genuine interest in the student pharmacist's learning and experience within pharmacy
B.) Role modelling - Facilitators of EL are aware of and act as a role model of the pharmacy profession, demonstrating for student pharmacists the expectations of pharmacy professionals	**Facilitators:** are aware of their position as a role model to student pharmacists demonstrate the standards of a pharmacy professional use current evidence and guidelines to deliver high quality patient care and services display good working relationships with their colleagues and team members demonstrate effective communication with others including patients, health care professionals, pharmacy staff and student pharmacists display positive interprofessional working within the multidisciplinary team display positive interpersonal attitudes and relationships with others display patient centred care in their practice
C.) Experiential Learning (EL) organisation - Facilitators of EL are aware of the requirements of the EL and plans to ensure the student pharmacist maximises the opportunity of the EL	**Facilitators:** plan and provide an appropriate induction as part of the EL have an awareness of the EL goals (student pharmacist's goals, University Learning Outcomes) and student pharmacists' co-produce a plan to meet the goals of the EL provide sufficient learning activities to meet the learning outcomes of the EL ensure a range of learning opportunities to develop the student pharmacist plan training that is relevant to the specific area of practice accommodate and support student pharmacists with any identified additional support needs involve appropriate team members in developing and supporting the student pharmacist plan to provide adequate supervision of the student pharmacist to reduce exposure to risk until competence is demonstrated ensure that they have adequate time to support the student pharmacist ensure adequate support regarding the education and training of student pharmacists within their practice environment demonstrate need to balance education and training with service delivery

Capability domain	Capability descriptors
	ensure the required EL documentation is completed throughout the placement ensure continuity of support for the student pharmacist and provide a suitable handover, if required engage with and contribute to the quality management processes associated with EL
D.) Learning environment - Facilitators of EL prepares and develops an inclusive and supportive learning environment where the student pharmacist can develop	**Facilitators:** display their commitment to a learning culture within their organisation to develop current and future team members prepare the learning environment, including team members, patients and other colleagues prior to EL create and maintain a safe, supportive learning environment where learning is facilitated respond appropriately to any concerns raised about the learning environment ensure a manageable workload on student pharmacists in order to not compromise their learning
E.) Learning relationships - Facilitators of EL develop and maintain appropriate and positive learning relationships with their student pharmacists	**Facilitators:** should be approachable and accessible to their students establish appropriate professional and social boundaries with their student pharmacist discuss the expectations relating to the EL with the student pharmacist discuss the EL with the student pharmacist to identify their development needs adapt their plan for the EL to reflect the student pharmacists' development needs actively listen to student pharmacists concerns and questions provide ongoing student support and supervision throughout EL through effective communication adapt their facilitation style to the requirements of the student pharmacist communicate clearly with the student pharmacists and ensure that they are understood encourage student pharmacists through acknowledging good practice and providing feedback encourage student pharmacists to reflect on their practice, linking practice to their learning and experiences encourage student pharmacists to question practice and evaluate care provided promote discussion with their student pharmacist, rather than just providing an answer identify any barriers to learning and work to formulate strategies to overcome these demonstrate respect for each student pharmacist and show a compassionate attitude towards them
F.) Facilitation of learning - Facilitators of EL provide and employ different methods to facilitate and encourage the learning of student pharmacists	**Facilitators:** make the most of planned and ad-hoc educational opportunities to support their student pharmacist's development provide learning opportunities that incorporate active participation in patient interaction encourage student pharmacists' participation within the pharmacy and multidisciplinary teams organise adequate demonstration and coaching of clinical skills where relevant to area of practice engage in discussions with the student pharmacist to facilitate learning and development of practice contribute to the student pharmacist’s development of multitasking and prioritisation skills provide the student pharmacist with responsibility based on their current abilities in line with University Learning Outcomes provide constructive feedback to the student pharmacist that identifies their strengths and areas for improvement provide ongoing unbiased and non-judgemental feedback of the student pharmacist's progress in achieving the EL goals signpost student pharmacists to suitable resources to enhance and support their development utilise and contribute to the development of resources to support student pharmacist’s development during EL appropriately identify student pharmacists who are perceived to be struggling and link in with University reporting mechanisms

Capability domain	Capability descriptors
	encourage student pharmacists to take responsibility for their actions
G.) Assessment - Facilitators provide ongoing monitoring of the student pharmacist learning and assess that the goals of the EL have been accomplished	**Facilitators:** are aware of the student pharmacists' level of knowledge, skills, and behaviours at the start of their EL recognise the complexity of tasks and assign tasks appropriately to the student pharmacist based on their knowledge, skills and behaviours provide student pharmacists with increased level of responsibility based on their level of competence in line with University Learning Outcomes ensure that appropriate assessment strategies are used effectively to assess the student pharmacist in line with University Learning Outcomes provide a final evaluation to the university highlighting strengths and areas for development for the student pharmacist
H.) Facilitator development - Facilitators of EL engage in activities to develop themselves as a facilitator	**Facilitators:** seek feedback from multiple sources to improve the quality of their educational practice evaluate and self-reflect on the effectiveness of their current practice in supporting student pharmacists develop learning goals to improve their current educational practice based on evaluation, feedback and their reflections engage in appropriate activities to continually develop their educational practice and update their practice accordingly promote and participate in interprofessional learning and activities liaise with other EL facilitators to share practice and develop support networks contribute to the further development of EL for student pharmacists through providing feedback to the university