

10 KEY FACTS about the General Pharmaceutical Council



GPhC launching:
2010

A new, independent regulator – the General Pharmaceutical Council (GPhC) – for pharmacists, pharmacy technicians and pharmacy premises is being set up in England, Scotland and Wales in 2010.* The GPhC has already been granted legal status as an organisation, which means that, although it is not yet operational, it is able to make decisions about strategy, policy and operational matters. The establishment process is being led by the GPhC’s Chair, Bob Nicholls CBE, and the other 13 Council members.

Establishment

FACT 1	The GPhC will replace the Royal Pharmaceutical Society of Great Britain (RPSGB) as the regulator for pharmacists, pharmacy technicians and pharmacy premises in Great Britain from 2010.*
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- The exact launch date will be set once the parliamentary process is clear.
- The RPSGB will continue to be the regulatory body until the GPhC is established.
- The GPhC will cover England, Scotland and Wales in the first instance. Northern Ireland Ministers will decide whether to transfer the regulatory functions of the Pharmaceutical Society of Northern Ireland once the GPhC is established.

Main objectives

FACT 2	The aim is to ensure that public health, safety and wellbeing are the main objectives of professionals delivering pharmacy services.
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- This will be achieved through separating professional leadership from regulation, harmonising pharmacy regulation with regulation of other health professions, developing new standards to provide a clearer framework within which to work, and ensuring that the regulator is independent of all interest groups.

*Subject to parliamentary process and timetable.

Registration

FACT 3	The GPhC will create a single register for all pharmacists, pharmacy technicians and pharmacy premises. This will replace the registers currently held by the RPSGB. There will be no non-practising register.
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- All pharmacists currently on the RPSGB's practising register will be notified in writing when their registration is automatically transferred to the GPhC. Those on the RPSGB's non-practising register may consider registration with the GPhC, subject to complying with the registration requirements.
- Those pharmacists who fall within the definition of 'practising' in the Pharmacy Order 2010 (see Fact 5) and wish to use the restricted title 'pharmacist' will be required to register.
- The statutory register for pharmacy technicians opened on 1 July 2009. The RPSGB is holding the register as the current regulator. Pharmacy technicians who have work experience and a vocational qualification will be able to apply to join the statutory register until 30 June 2011; these arrangements are known as 'grandparenting' and are intended to ease the transition to a regulated profession for technicians. The grandparenting arrangements will continue with the GPhC until 30 June 2011. After that date, registration will require a specific qualification and the title 'pharmacy technician' will be restricted to those on the GPhC register. Those individuals who are currently practising or who intend to practise as pharmacy technicians are encouraged to register as soon as possible.
- All pharmacy technicians currently on the RPSGB's practising register will be notified in writing when their registration is automatically transferred to the GPhC. Those on the non-practising register may consider registration with the GPhC, subject to complying with the registration requirements.
- The use of abbreviations or post-nominals will be a matter for the GPhC to decide in relation to its registrants. The use of the designatory letters MRPharmS or FRPharmS is a matter for the new professional leadership body.

Restricted titles

FACT 4	In the future, the titles 'pharmacist' and 'pharmacy technician' will be restricted to those registered as such on the GPhC register.
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- Anyone who wishes to practise as a pharmacist or pharmacy technician, and to use the restricted titles 'pharmacist' or 'pharmacy technician', must be registered as such on the GPhC register. For pharmacists this will apply immediately, while for pharmacy technicians it will apply from July 2011.
- This proposal and the proposal to end the non-practising register resulted in much debate among pharmacists when consulted upon. All views were carefully considered by the Department of Health, Scottish Government and Welsh Assembly Government. Ministers decided that it was important for public protection and patient safety that all those who are registered with the regulator, and can therefore call themselves a 'pharmacist' or 'pharmacy technician', have met the requirements to be fully qualified, competent and fit to practise.

Definition of practising

FACT 5 There is a new, wider definition of practising, which means that many of those not previously registered as practising will now need to consider registration.

- The definition of practising in the Pharmacy Order 2010 reflects the full breadth of practice and is:
 "... if whilst acting in the capacity of or purporting to be a pharmacist or a pharmacy technician, that person does any work or gives any advice in relation to the preparation, assembly, dispensing, sale, supply or use of medicines, the science of medicines, the practice of pharmacy or the provision of healthcare."
- This means that pharmacists and pharmacy technicians whose roles do not include delivery of care to individual patients or of services directly to members of the public will need to register if they wish to use the restricted titles or if their role requires registration, e.g. if they sign off patient group directions.

The Council

FACT 6 The GPhC has a Council of 14, with equal numbers of registrant and lay members. All Council members are appointed, not elected.

- GPhC Chair Bob Nicholls was appointed in June 2009. The other 13 Council members were appointed in September 2009.
- There are no reserved places for different sectors of practice. In June 2008, a government working group led by Niall Dickson published *Implementing the White Paper 'Trust, Assurance and Safety': Enhancing confidence in healthcare professional regulators*. This recognised that councils need to reflect the interests and concerns of key constituencies, but also that all members should be clear that their overriding purpose is the protection of the public and patients. It recommended that "no group should have guaranteed places on the council".
- However, in the interests of reflecting the differences in health service delivery in England, Scotland and Wales, the GPhC has at least one person on the Council who lives or works in each of the three participating countries.
- The GPhC will have three statutory committees – Investigating, Appeals and Fitness to Practise. It is proposed that Council members will not be permitted to be members of the statutory committees and that each statutory committee will have a lay chair and lay deputy chairs.
- The GPhC will also have the power to establish non-statutory committees.

Fees

FACT 7 Registration renewal fees for 2011 will be set by the GPhC later in 2010, following a consultation with registrants.

- It is proposed that prospective pharmacists and pharmacy technicians will be required to pay an application fee and an initial entry fee which will cover registration for one year. This is a change for prospective pharmacists. This change has been proposed to reflect the separate elements of the registration process. In subsequent years, pharmacists and pharmacy technicians would pay the renewal fee.
- The relevant money for regulatory activities for the remainder of 2010 will be transferred to the GPhC by the RPSGB in 2010 once the GPhC is established.
- There are no fees for non-practising registrants, as the GPhC will not hold a non-practising register. Registrants must intend to practise in Great Britain, the Isle of Man or the Channel Islands, so there are no specific provisions for overseas fees. Pharmacists and pharmacy technicians living overseas will be able to register if they intend to return to practice in Great Britain, the Isle of Man or the Channel Islands. Current non-practising and overseas registrants are encouraged to consider whether they need to move to the practising register of the RPSGB prior to the transfer of regulatory functions to the GPhC, as only those registrants on the practising register will automatically transfer to the GPhC register.
- Premises fees for 2011 will be set by the GPhC later in 2010.

Continuing professional development

FACT 8 The current RPSGB standards and guidance for continuing professional development (CPD) for pharmacists and pharmacy technicians are likely to be adopted for a transitional period.

- The GPhC will produce revised draft CPD standards and rules for consultation at a date to be determined. Statutory CPD will start once the new standards and rules are in place.
- Records created in the period before statutory CPD will be allowed to form part of the assessment process carried out by the GPhC from 2010 onwards.

Standards and rules

FACT 9 The GPhC will publish interim standards for: conduct, ethics and performance; premises; and CPD (see Fact 8). These will largely be based on the RPSGB's current standards.

- Following a public consultation in 2010, these three sets of standards will be adopted by the GPhC Council ahead of the transfer of regulation, for a transitional period. A clear work plan for further development of these standards will be developed and implemented.
- The GPhC will consult on the adoption of the RPSGB's existing standards and accreditation procedures for a transitional period.
- At a later date, following the transfer of regulation, the GPhC will consult on revised standards for: proficiency and education (for those qualifications that are required for registration and any subsequent annotations to the register); pharmacy owners, superintendent pharmacists and premises; conduct, ethics and performance; and CPD.
- The GPhC has also been given the responsibility, in the Pharmacy Order 2010, to make rules in a number of areas. The first five sets of rules are: fees; registration; appeals; statutory committees and their advisers; and fitness to practise. Following a public consultation (until 4 May 2010), and any changes required, these rules will be adopted by the GPhC Council ahead of the transfer of regulation.
- The legislative rules set out clearly how GPhC regulation will operate and are designed to work alongside the GPhC's regulatory standards. These first five sets of rules are those that need to be in place to enable the GPhC to open.
- The draft rules build on those of the current regulator, the RPSGB. Where necessary, changes have been made in order to ensure that the rules are in line with the new statutory framework in the Pharmacy Order 2010.
- A further two sets of rules – covering CPD and superintendents, pharmacy owners and premises – will be made available for consultation at a date to be determined.

Independence and accountability

FACT 10 The GPhC will be an independent regulator, accountable to Parliament.

- The Government believes that, to ensure public confidence, professional regulators must be independent in their actions.
- The GPhC's Council has been independently appointed and, to ensure that it is accountable to Parliament rather than to Ministers or the profession, there are legislative provisions requiring the GPhC to produce reports on the exercise of its functions. These will include a description of the arrangements the Council has put in place to ensure that it adheres to good practice in relation to equality and diversity, a statistical report about its fitness to practise arrangements, and a strategic plan. These will go to the Privy Council, which will lay the reports before the UK and Scottish Parliaments.

For a GPhC brochure and further information, go to www.pharmacyregulation.org