

ANALYSIS OF THE EFFECTS ON EQUALITY

Draft General Pharmaceutical Council (Amendment of Miscellaneous Provisions)
Rules 2015

EA completed by:

Signed:



Date: 20 August
2015

Name: Christine Gray, Rules Lead, GPhC

Decision approved by:

Signed:



Date: 20 August
2015

Name: Elaine Mulingani, Associates and Partners Manager

1. Aims and purpose of the project/policy

The General Pharmaceutical Council (GPhC) proposes to make these rules ('the policy') in exercise of the powers conferred by articles 23(1), 27(1), 32(4), (6) and (7), 37(3), 52(1) and (2), 55A(1) and (3), 57(3), 61(1)(b) and (3)(h) and 66(1) of, and paragraph 5(1)(a) of Schedule 1 to, the Pharmacy Order 2010, having consulted such persons and organisations as it considers appropriate including those listed in sub-paragraphs (a)-(h) of article 66(3) of that Order.

It is our job to protect, promote and maintain the health, safety and wellbeing of members of the public and, in particular, those members of the public who use or need the services of pharmacy professionals or services provided by a registered pharmacy. The purpose of the policy is to make changes to the GPhC's rules covering registration and fitness to practise processes, and the membership of our statutory committee panels. The main aim of the policy is to implement the statutory requirements for a registrant to have an appropriate indemnity arrangement in force, and to have the knowledge of English necessary for safe and effective practice, as conditions of their registration with us.

In addition, the policy would:

- allow applicants for registration to provide a copy of a UK passport as evidence of identity with or without its front cover, to avoid any breach of Crown copyright; and
- introduce measures to avoid conflicts of interest arising from common membership of Appeals Committee and Fitness to Practise Committee panels.

The main changes proposed under the policy are summarised below:

To require a registrant, on receipt of a notice from the Registrar, to provide information to allow us to determine whether there is an indemnity arrangement in force that provides appropriate cover in relation to them.

To require a registrant to inform the Registrar within seven days if there ceases to be an indemnity arrangement in force that provides appropriate cover in relation to them.

To require an applicant for registration, renewal or restoration to declare that they understand that they cannot practise unless there is an indemnity arrangement in force that provides appropriate cover in relation to them.

To require an applicant for an annotation to their entry in the register, or for restoration of an annotation, to specify whether there is, or will be, appropriate cover in force under an indemnity arrangement.

To require an applicant for registration to provide evidence that they have the necessary knowledge of English.

To require an applicant for renewal or restoration to specify whether they hold evidence that they have the necessary knowledge of English.

To amend our fitness to practise processes to cover proceedings where it is alleged that a person's fitness to practise is impaired because they do not have the necessary knowledge of English, and to provide for an assessment of a person's knowledge of English to be commissioned in such cases.

To allow an applicant for registration to provide a certified copy of a UK passport as evidence of identity with or without its front cover.

To preclude common membership of an Appeals Committee panel and a Fitness to Practise Committee panel where this could give rise to a conflict of interest.

2. Review available information

The policy has been developed with input from Council members, statutory committee members and reserve members, and relevant GPhC employees. Informal clearance of the draft rules for consultation purposes has been given by the Privy Council's advisers (government policy officials and solicitors).

3. Screening for relevance to equality and diversity issues

Does this project/policy have any relevance to (delete as appropriate)

Race	Yes	No
Gender reassignment	Yes	No
Sex	Yes	No
Disability	Yes	No
Marriage or Civil Partnership	Yes	No
Age	Yes	No
Religion or belief	Yes	No
Sexual orientation	Yes	No
Maternity or Pregnancy	Yes	No

4. From the answers supplied, decide if the proposal impacts upon diversity or equality issues. If yes, a full impact analysis is required

Full EA required	Yes	No
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5. Consultation / Involvement

Who was consulted?

The policy affects registrants, potential registrants, the GPhC's statutory committees and GPhC employees.

The views of GPhC Council members, statutory committee members and reserve members, and relevant employees have been sought during the development of the policy to date. We will be undertaking a public consultation on the policy before it is finalised so as to obtain the views of stakeholders and to meet our statutory obligations under the Pharmacy Order.

Date and method of consultation

The views of relevant GPhC employees were sought between February and August 2015 through a combination of informal discussions and email. The views of GPhC Council members were sought between April and August 2015 through a combination of informal discussions and email. The views of GPhC statutory committee members and reserve members were sought between July and August 2015 through email.

Give a brief summary of the results of the consultation/involvement. How have these affected the proposal?

The views of GPhC Council members, statutory committee members and reserve members, and employees have informed decisions on the proposals to be included in the policy for consultation purposes.

6. Full impact assessment

Explain the potential impact (whether intended or unintended, positive or adverse) of the proposal on individuals or groups on account of:

Race

Registrants are already under an obligation, under article 32 of the Pharmacy Order 2010, to have appropriate indemnity cover in force. The GPhC's standards also require registrants to ensure that all their work, or work for which they are responsible, is covered by appropriate professional indemnity cover. The proposed changes to rules relating to the new statutory requirement for a registrant to have an appropriate indemnity arrangement in force should not therefore have a significant impact on any of the equalities strands.

The proposed changes to rules relating to the new statutory requirement to have the necessary knowledge of English are likely to affect European pharmacists and pharmacy technicians. They may be required to pay for a language test or be prevented from practising in Great Britain if their knowledge of English is not at the required level. However, this should address the current disparity between the controls relating to the language competence of European pharmacy professionals and those from outside the EEA, who are already subject to such controls. This should provide a more consistent approach and enhance patient safety.

We are conscious that Welsh has equal legal status to English in Wales. However, the relevant EC directive states that Member States may only introduce language controls on one language per Member State. English is most appropriate for Great Britain. The consultation will be available in Welsh and may be requested in other formats.

The Health Care and Associated Professions (Knowledge of English) Order 2015 made competence in the English language a fitness to practise concern in its own right. This policy would implement that change. This could have some impact on the representation in fitness to practise processes of foreign registrants. However, these provisions will apply to all applicants, including those from the UK. The policy is not therefore directly discriminatory against nationals of particular countries or people of particular ethnicities. The policy is intended to take a reasonable and proportionate approach to language controls to protect patients and the public.

We will consult on and publish guidance about the evidence, information and documents that may be provided by an applicant for the purpose of satisfying the Registrar that they have the necessary knowledge of English, and the process by which the Registrar will determine whether he is satisfied that the person has this knowledge.

We will also consider the need for further guidance to our statutory committees and will monitor the impact of the policy.

Gender reassignment
No impacts identified.
Sex
No impacts identified.
Disability
The Health Care and Associated Professions (Knowledge of English) Order 2015 made concerns about competence in the English language a fitness to practise concern in its own right. This policy would implement that change. This could potentially have some impact on the representation in fitness to practise processes of people with speech and language difficulties. The statutory committees, when determining an individual's fitness to practise, take into account a number of factors, including the impact of any disability or health condition. That would not change upon the introduction of this policy. We will consider the need for further guidance to our statutory committees and will monitor the impact of the policy. A language assessment may be commissioned to assess whether a person has the necessary knowledge of English for safe and effective practice. The providers of such assessments would need to take into account any disability or health condition that the person might have when conducting an assessment and would need to consider any request for a reasonable adjustment to the process.
Marriage or Civil Partnership
No impacts identified.
Age
No impacts identified.
Religion or belief
No impacts identified.
Sexual Orientation
No impacts identified.
Pregnancy or Maternity
No impacts identified.
Other Issues

7. Monitoring

a) How will the implementation of the proposal be monitored and by whom?

Through the consultation process and through performance monitoring reports submitted to the GPhC's Council and published on our website www.pharmacyregulation.org.

b) How will the results of monitoring be used to develop this proposal and its practices?

The outcome of the consultation process will be reported to the Council and will inform the Council's final decisions on the policy.

c) What is the timetable for monitoring, with dates?

The outcome of the consultation process is scheduled to be reported to the Council in April 2016, when it is anticipated that the Council will consider making the amendments to rules.