26 February 2016

Dear Will and Keith,

Pharmacy at the Heart of the NHS

Thank you for the copy of your letter to Sue Sharpe, PSNC Chief Executive, dated 17 December 2015, and also for meeting us to explain your proposals set out in your published slides and materials, *Community Pharmacy in 2016/17 and beyond*.

The financial settlement for community pharmacy, and the Government’s vision of how efficiencies and increased productivity in community pharmacy could be achieved, are not in themselves a matter for us as the independent regulator. However, any significant changes to the range or methods of delivery of services provided by our registrants will have implications for our work and we are grateful for being kept informed of your outline proposals.

It is critical for us to monitor how services develop across England, Scotland and Wales and the expectations society places on pharmacy professionals, particularly if there is a continuing shift in public policy towards an increasingly clinical role for pharmacy professionals. There are a number of specific points highlighted in your letter, the associated slides and in the briefing session which will be important for us to monitor and feedback – when more details emerge – as to what, if any, implications there will be for us as the regulator. I have set these out below:

- Any significant change to the way in which pharmacy services develop may have implications for the content of both pre and post registration pharmacy education and training in which we, along with a number of other bodies, have a significant role. This will also need to feed into our work to develop a framework for continuing fitness to practise.
- Any significant change to the nature of on-line pharmacy service delivery, or distance-selling, through changes to the terms of service, will have implications for the way in which we regulate pharmacies. Although our pharmacy standards are
outcome focussed and apply equally to more traditional models of registered pharmacies and internet pharmacies, we will need to consider the detail of any changes carefully.

- Likewise, the ability for patients to select their delivery or ‘click and collect’ will have some impact on the way in which we regulate including standards for registered pharmacies and our inspection function.
- The draft proposals “to allow all pharmacies to access the efficiency created by ‘hub and spoke’ dispensing” will, as you acknowledge, require a review of the legal framework. This could, subject to decisions by Parliament, change the law around the registration of pharmacies and in turn, would require us to update and communicate new registration criteria. In any event, a move to enable a ‘hub’ and a related ‘spoke’ to be operated by different companies will raise significant issues of responsibility, accountability and liability, which will need to be worked through.

The Council has made clear its view that attempts to address health and care challenges will benefit from an enhanced role for pharmacy in general, as well as pharmacists and pharmacy technicians as regulated health professionals. Changes to health and care delivery and the structure of the contract will need careful consideration by us as we continue to ensure regulation of the pharmacy team and registered pharmacies remains appropriate and effective.

A final key point concerns the government’s intention to move forward with changes to the framework for supervision within pharmacy. Getting this right will be important if outcomes for patients are to be improved and opportunities for pharmacy are to be realised. We look forward to continuing to discuss the regulatory implications with the Department of Health and officials in Scotland and Wales as a member of the Rebalancing Medicines Legislation and Pharmacy Regulation Programme Board and relevant sub-groups.

Yours sincerely,

Nigel Clarke
Chair
General Pharmaceutical Council (GPhC)