Minutes of the Council Meeting held on 14 April 2011 at 129 Lambeth Road, London SE1 7BT at 10.00am

Present

Bob Nicholls - Chair
Cathryn Brown
Sarah Brown
Ray Jobling
Liz Kay
Judy Worthington
Peter Wilson

John Flook
Keith Wilson
Tina Funnell
Soraya Dhillon
Celia Davies
Kirstie Hepburn

In attendance

Duncan Rudkin (Chief Executive & Registrar)
Christine Gray (Head of Governance)
Michele Savage (Council Secretary)
Bernard Kelly (Director of Resources and Corporate Development)
Elaine Mulingani (Head of Private Office)
Hugh Simpson (Director of Policy and Communications)
Hilary Lloyd (Director of Regulatory Services)
Damian Day (Head of Education & Quality Assurance) – minutes 417-424
Janet Flint (Post-registration Manager) – minutes 417-418
Elizabeth Filkin (Appointments Committee Chair) – minutes 433-434

ATTENDANCE & CHAIR’S INTRODUCTORY REMARKS

413 The Chair welcomed the Council members, observers and staff to the meeting. Apologies had been received from Lesley Morgan. The Chair informed the Council that Gordon Dykes had been appointed to the Council as the member in Scotland. He went on to explain that Gordon would be standing down from his current position as NPA Board member to join the GPhC on 1 September. The Chair thanked the current Council member in Scotland, Kirstie Hepburn, for her work and told the Council that Kirstie had agreed to stay on until August. The
Chair told the Council that Council Secretary Michele Savage was leaving to join the Royal Society of Chemistry and thanked her for her work.

**DECLARATIONS OF INTEREST**

414 The Chair asked members whether they had any interests to declare in respect of the agenda items. Peter Wilson declared an interest in paper 04.11/C/01 CPD framework and rules as a former employee of the RPS who was involved in the preceding work and paper 04.11/C/03 as he had worked on previous proficiency standards. Keith Wilson (employee of School of Pharmacy) and Soraya Dhillon (Head of School of Pharmacy) declared an interest in papers 04.11/02A and 04.11/02B on education and training standards and accreditation methodology.

**MINUTES OF THE LAST MEETING**

415 The minutes of the meeting held on 10 February 2011 were agreed as a true record of the meeting.

**MATTERS ARISING AND OUTSTANDING ACTION POINTS**

416 Peter Wilson, as Chair of the Revalidation task and finish group, updated the Council on work to date. The Council was told that the group was taking a fresh look at the purpose and principles underpinning work relating to revalidation in the light of the government’s position statement in *Enabling Excellence*. The issues would be explored with a wider stakeholder group at a workshop before proceeding further. Duncan Rudkin (DR) asked that the views of Council members should be canvassed on who wished to be involved in the workshop.

416.1 On the outstanding action points, DR explained that the early review of methadone exemption was covered in the Chief Executive & Registrar’s report and the internet pharmacy logo issue had been included in the premises project, with which it was inextricably linked.

**CPD FRAMEWORK AND RULES**

417 Christine Gray (CG) presented paper 04.11/C/01 asking the Council to approve the draft report of the CPD framework and rules consultation, approve the CPD framework, make the GPhC CPD and Consequential Amendments Rules 2011 and agree that the GPhC corporate seal be affixed to them.

417.1 CG told the Council that the proposals had been well received, reflecting the fact that CPD was already well established in pharmacy. The rules and framework would come into the force on the same day, once the rules had been through the
parliamentary process. It was therefore not possible to specify the commencement date at the meeting.

417.2 The Council discussed the paper and raised the issue of whether the review of CPD records identified problems with performance, particularly when many registrants were already subject to performance reviews by their employers. Janet Flint confirmed that the process had identified issues that could impact on performance. The Council agreed that it would be important to re-examine the process to ensure it was fit for purpose.

417.3 The issue of the length of time allowed to respond to a notice before removal from register was discussed and the Council was reassured that this was an action following a lengthy period and the circumstances of non-compliance were always looked into carefully before making a final decision. DR explained that the Registrar may remove a register entry but such an act would have been preceded by several attempts to engage the registrant constructively. In any event, the Registrar must always act reasonably and this provided safeguards.

417.4 It was acknowledged that there were still areas needing further work, including a policy for those who are returning to practice, and this was in the workplan.

418 The Council:

i. approved the draft report of the CPD framework and rules consultation for publication (appendix 1);

ii. approved the CPD framework (appendix 2); and

iii. made the General Pharmaceutical Council (Continuing Professional Development and Consequential Amendments) Rules 2011 and agreed that the GPhC’s corporate seal be affixed to them.

NEW STANDARDS FOR THE INITIAL EDUCATION AND TRAINING OF PHARMACISTS

419 Duncan Rudkin (DR) gave an overview of the next two papers, explaining that they picked up on previous work by the RPSGB, by the Department of Health in the period before the GPhC came into existence and more recently by the GPhC itself, which had included important public and patient involvement in the recent consultation. The papers were a culmination of an in-depth and lengthy process with input from the Council of University Heads of Pharmacy Schools and pre-registration expertise. DR reminded the Council that, while external developments should be borne in mind, the Council was the body responsible for setting the standards for entry to the pharmacy professions.
419.1 Damian Day (DD) explained that the Council was being asked to agree the standards for GB-trained pharmacists and standards for non-EEA trained pharmacists. DD explained that standards were snapshots in time but written with an awareness of the changing context. The standards would work for a four or five year MPharm. Respondents strongly supported what was proposed but there was considerable concern over the amount of science in the MPharm. This had been addressed, leading to some concerns that there was too much emphasis on science, as a result of possibly over-correcting to emphasise the science aspects. DD explained that there needed to be a balance but this was for the accreditors to check, because the GPhC outcomes approach would not include specifying how many hours should be spent on which subjects. Education on leadership and management was raised late in the consultation and DD told the Council that this would be explored in further work. The next steps would be to draft a report on the consultation in line with the comments made by the Council.

419.2 DD explained how the standards would be implemented through a phased plan with two schools implementing the standards in the next academic year followed by nine schools in the 2012-13 academic year.

419.3 The Council were supportive of leadership and management forming part of future work. The Council welcomed the involvement of patient & public groups in the development of the standards. Much of the discussion was around drafting points and DD said he would address these. Concern was raised about the inclusion of personal views in the independent analysis and DD assured Council that this would be avoided in future.

420 The Council agreed:

i. *Future pharmacists: standards for the initial education & training of pharmacists* [standards for GB-trained pharmacists];

ii. *Standards for the initial education and training of pharmacists wanting to register in Great Britain* [standards for non-EEA-trained pharmacists]; and

iii. that the response to the consultation would be drafted taking into account the Council’s comments, for approval by the Chief Executive & Registrar.
A NEW ACCREDITATION METHODOLOGY FOR COURSES LEADING TO REGISTRATION OR ANNOTATION AS A PHARMACIST IN GREAT BRITAIN

421  Damian Day (DD) introduced paper 04.11/C/02B asking the Council to consider and agree a new accreditation methodology. A new accreditation method was needed for the new standards and the respondents to the consultation agreed with this. The universities, although supportive, understandably wished to see the operational guidance. DD told the Council that an extra visit was planned for each accredited school as an explanatory exercise to ensure clear understanding of the requirements. DD told the Council that a significant change had been made from collecting students’ feedback on the courses to collecting reports on courses from pre-registration trainees or new registrants. This would give valuable enhancement to the feedback on the courses.

421.1  The Council welcomed the accreditation methodology and the changes to the feedback reporting and the commitment to monitoring the burden of the process on the universities. The Council acknowledged that there was a lay member on each team but felt that broader patient & public input could be brought in by other means. Value for money was important and there was a need to ensure that the cost to the universities was proportionate. The Council asked that a timeline for all universities adopting the standards be clarified.

422  The Council agreed the accreditation methodology for pharmacy courses leading to registration or annotation as a pharmacist in Great Britain

DEVELOPING STANDARDS OF PROFICIENCY

423  DR presented paper 04.11/C/03 asking the Council to agree to commission work on standards of proficiency for initial registration as a pharmacist and as a pharmacy technician and standards of proficiency for continuing registration as a pharmacist or a pharmacy technician. The Chair explained that this reflected the new requirements in the Pharmacy Order but would take account of earlier work done in the run-up to the establishment of the GPhC. DR told the Council that there was a need to check whether standards of proficiency should differ from learning outcomes for pharmacist and pharmacy technicians.

423.1  The Council were supportive of the pragmatic approach to having the Revalidation task and finish group look at this. Proficiency included attitudes and behaviours and could be broader than learning outcomes, although other aspects were covered in the standards of conduct, ethics and performance. The Council asked that the task and finish group consider whether there should be a single standard for practice and if generic standards of proficiency could be developed which would apply to all pharmacists (or all pharmacy technicians, as the case may be) whether newly registered or established.
The Council agreed to commission work:

i. to explore the need for standards of proficiency for initial registration as a pharmacist and as a pharmacy technician; and

ii. to explore the need for and an approach to standards of proficiency for continuing registration as a pharmacist or a pharmacy technician, under the guidance of the Revalidation Task and Finish Group.

STATUTORY COMMITTEE APPOINTMENTS: SECOND AND FINAL REPORT

425 Sarah Brown (SB) introduced paper 04.11/C/04 seeking agreement from the Council on the recommendations in the paper from the statutory committee appointments task and finish group. SB explained to the Council that the paper covered more operational detail than would normally be brought to the Council. SB told the Council that there had been no need to revisit the decisions that been brought to the Council in January 2011. The report before the Council focused on the more detailed aspects on appraisals, skills and competencies etc.

425.1 It was agreed that the appraisal process was particularly important and observation of the chairs was a helpful part of this process. The Council thought that development of skills and competencies for statutory committee members was important but that the Appointments Committee was not best placed or resourced to do this. It was for the Council to determine the competencies. A potential need for more equality and diversity data was raised and Elaine Mulingani told the Council that this would be considered by the Equality and Diversity leadership group and the timescale of this would be advised to Council. While it was not the role of the Appointments Committee, the Council recognised that it would be helpful to have performance measures on a broader range of issues than were currently covered in the performance monitoring reports, such as quality measures for hearings.

The Council agreed that:

i. the enhancements to the current induction and training process for statutory committee members be taken forward;

ii. the GPhC’s interim methodology for performance appraisal of statutory committee members be approved for continued use, subject to review in 2 years’ time;

iii. a similar process and forms (without the hearing feedback forms component) be used for the Appointments Committee (AC) chair and members;
iv. the AC be tasked with reviewing the procedure for suspension and removal of statutory committee members, with a view to producing a revised draft for the Council’s approval by September 2011;

v. the rules be amended to remove the requirement for AC to develop statutory committee competencies, and that the executive, in consultation with the AC, be tasked with developing these competencies for the Council’s approval;

vi. the statutory committee competencies be simplified at their next iteration;

vii. the staff should actively pursue discussions with other health professional regulators, to determine the realistic potential for joint working in relation to the appointment and management of statutory committee members, to inform future Council consideration; and

viii. the suggestions for review and/or adoption of best practice measures in relation to equality and diversity be taken forward.

STRATEGIC REVIEW OF RISKS

427 DR introduced paper 04.11/C/05 asking the Council to discuss and note the risk review as summarised in the paper. DR welcomed the comments from the Council on the previous iteration of the risk register and the input from the Audit and Risk Committee and the internal auditors. The risk register reflected the transitional phase of risk management processes and the paper before the Council was drawn from the current format. A new format would be brought to the Council in due course, providing more specificity and showing movement of risk scores.

427.1 The chair of the Audit and Risk Committee John Flook (JF) agreed that the content and format of the risk register were work in progress and reflected the GPhC being a new organisation. JF told the Council that nature of the risks facing the organisation had shifted significantly in the year since the GPhC was established.

427.2 The Council discussed the document and were content with the direction of travel and the assurance that the Audit and Risk Committee was maintaining oversight of the risk register.

428 The Council noted the paper.

CHIEF EXECUTIVE & REGISTRAR’S REPORT

429 DR presented the Chief Executive & Registrar’s report 04.11/C/06. Referring to paragraph 4.1 of the paper, DR clarified that the Council had delegated sign off of the consultation report and the associated changes to pharmacy technician
registration criteria to the CE&R. The consultation report had now been signed off, taking into account the comments received.

429.1 The Council noted that that its response to Modernising Pharmacy Careers Workstream One had been submitted to the DH and had influenced the final analysis. Funding arrangements for higher education institutes were still unclear and much work still needed to be done.

430 The Council noted the report.

PERFORMANCE MONITORING REPORT

431 DR introduced paper 04.11/C/07 asking the Council to comment on and note the performance monitoring report. DR told the Council that significant work on performance monitoring had been done on a theoretical basis prior to the GPhC becoming operational and there was now a better set of information for the Council. The next phase was to build on this and broaden our reporting to give an appropriate level of detail on a wider range of areas.

431.1 The Council agreed that this performance monitoring report was a good step forward and welcomed the format and the graphical representation of data.

Fitness to practise

431.2 With reference to the fitness to practise data, the Council expressed concern that there were more cases being received than being disposed of each month, by a small margin. The Council noted that the number of legacy cases were going down and suggested that an approach similar to that for disposal of legacy cases could be used for new cases. Hilary Lloyd (HL) told the Council that they had identified where the bottle-necks were in the process and these were being addressed.

431.3 Whilst encouraged by progress with the legacy caseload, the Council identified that the performance information disclosed the potential for a GPhC backlog to begin to develop. It was agreed by HL and DR that further information should and would be provided to the Council in June about measures to mitigate that risk operationally. In addition, the Council identified the need and opportunity to continue the strategic discussions which had already commenced about future development of decision-making in fitness to practise. This review should explore the potential for taking the ‘just disposal’ approach to another level, with the GPhC’s own cases. The Council expressed a commitment to open-minded radical thinking on this score, which should include critical consideration of the role and value of statutory committees, in the light of evidence of other forms of efficient, effective and proportionate decision-making.
Pharmacy technician registration

431.4 The Council asked for assurances about planning for the likely further spike in pharmacy technician registration applications during the last weeks of the transitional period. HL confirmed that resources were being increased to deal with the workload across registration and the aim was to allow the anticipated spike in applications to be dealt with before the peak renewal period. DR confirmed that a comprehensive appraisal of the full range of options for handling the anticipated influx of applications had been carried out (including full and partial outsourcing) and had been reviewed by him, and he was satisfied that managing the workload in-house, with temporary additional resources as required, was the only responsible option.

Management Accounts

431.5 The Council considered the management accounts as at February, which indicated that the year-end report would show a surplus of income over expenditure. This surplus would be higher than originally forecast. Bernard Kelly (BK) explained that this was partly a result of higher income from a higher number of registrants than expected and also of a significant variance from forecast expenditure. In response to questions, BK reported that, while some elements of income would be recurring, the saving on expenditure could not be expected to continue. The lower expenditure than forecast was a result of delays in recruiting to new positions and in increasing hearing days and the throughput of fitness to practise cases. As the backlog was tackled and new organisational arrangements and procedures were put in place, expenditure levels would rise. There was also the issue of investment in new systems, which was expected to be funded from grants made by the DH, and the expected new CHRE levy which would impact in 2012 and should be factored into future budgets and forecasts.

432 The Council noted the report.

APPOINTMENTS COMMITTEE ANNUAL REPORT

433 Elizabeth Filkin (EF), Chair of the Appointments Committee, presented paper 04.11/C/10 asking Council to note the annual report of the Appointments Committee. EF told the Council that she had been delighted by the quality of the applications and to date, the appointees were living up to expectations. EF raised a concern that some committee members were not getting as many hearings days as expected and there was some disquiet over this.

433.1 The Council expressed some concern over the lack of registrants applying to be members of statutory committees although it was acknowledged that this was not unique to pharmacy.
433.2 EF said that what was needed was to raise the profile of what the committee members did, perhaps through the pharmacy press and by talking to groups of pharmacists and pharmacy technicians. EF had worked with APTUK to encourage more pharmacy technicians to apply and there had been some success.

433.3 The Chair thanked EF for her report and undertook to review whether another report was required in six months’ time.

434 The Council noted the report.

APPLICATION OF THE JUST DISPOSAL POLICY

435 HL introduced paper 04.11/C/08 asking the Council to note the update on the progress with the review of all fitness to practise cases inherited from the Royal Pharmaceutical Society of Great Britain (RPSGB). HL reminded the Council that CHRE had conducted an audit of the cases disposed of under the just disposal policy, at the invitation of the GPhC, and had agreed with the decisions taken.

435.1 The Council asked whether there was any data on referrals from primary care organisations and whether there was a trend for cases to be referred to the GPhC when they were management issues rather than fitness to practise issues. HL undertook to look into this. DR told the Council that a risk would need to be added to the register that more cases might be referred to the GPhC inappropriately due to changes within the NHS. The Council raised the issue of the interaction between the Investigating Committee and the Registrar, in relation to legacy cases. DR clarified that, in relation to legacy cases only, the Pharmacy Order gave the Council the decision on how these were are dealt with and the Council had delegated authority to the Registrar under the just disposal policy.

435.2 The Chair thanked the staff for the good work and asked the Council to note that a further report was due in June.

436 The Council noted the report.

ANNUAL REPORT OF THE AUDIT AND RISK COMMITTEE TO THE COUNCIL

437 JF introduced paper 04.11/C/09 asking Council to note the annual report of the Audit and Risk Committee to the Council. JF told the Council that there had been one formal meeting during the period covered by the report but that additional informal working had allowed progress to be made. He was encouraged by the in-depth and challenging spirit shown by the Council members and external member on the committee.
The Council thanked the Chair for the good report and particularly for the work on risk management and the risk register.

The Council noted the report.

**AGREEMENT TO REVISED TERMS AND CONDITIONS OF EXTERNAL AUDITORS**

BK presented paper 04.11/C/11 asking the Council to agree the recommendation from the Audit & Risk Committee that the revised terms and conditions of the engagement letter of the external auditors be approved and that the Council delegates authority to the Chair to sign on, behalf of the Council, any further engagement letters for the internal and external auditors on the proviso that they are reported to the Audit & Risk Committee.

The Council agreed:

i. that the revised terms and conditions of the engagement letter of the external auditors be approved and;

ii. to delegate authority to the Chair to sign on behalf of the Council any further engagement letters for the internal and external auditors on the proviso that they are reported to the Audit & Risk Committee.

There being no further business, the meeting closed at 3.15 pm

Date of next meeting – 9 June 2011 - London