Public business

Rolling corporate plan April 2013 – March 2016

Purpose
To consider and discuss the draft rolling corporate plan for April 2013 – March 2016.

Recommendation

The Council is asked to agree the draft corporate plan, subject to any amendments.

1.0 Introduction

1.1 The GPhC Strategic Plan 2013-2016 has been laid before Parliament and the Scottish Parliament, as required by the Pharmacy Order.

1.2 The strategic plan set out the Council’s five key priorities for the next three business years. These were:

- Deliver our Core regulatory services in a way that is fit for current and future purpose;
- Strengthen our capability to measure and improve the efficiency and effectiveness of our operational performance;
- Communicate and engage effectively with key stakeholders;
- Anticipate and respond to developments in pharmacy and healthcare; and,
- Make sure we have the right people in place, with the right culture and organisational policies and procedures.
1.3 Our corporate plan reflects the five overarching priorities in our strategic plan. Under each of those priorities we identify work already underway, our key objectives and the targets we intend to achieve for the first year of this corporate plan, 2013/14, as well as expected areas for further activity in 2014/15 and 2015/16.

1.4 Specific activities to be carried out by teams will sit in operational plans, but the corporate plan sets out key aims and objectives for the GPhC under each of the core strategic priority areas for the relevant period.

1.5 The structure of the draft corporate plan has been updated to reflect better the scale and range of the work required by the GPhC if it is to deliver on the five strategic priorities. The new structure is intended to provide a clearer description to Council of the areas we intend to focus resources and to enable it to better hold the executive to account through performance monitoring and a review of the commitments we have made.

1.6 The revised structure is also intended to provide a clear indication to teams within the GPhC about the agreed strategic priorities and what is required from the Executive by Council and to enable more effective business and operational work planning.

2.0 Key considerations

2.1 The revised rolling corporate plan is intended to reflect both the internal and external challenges and thus enable the organisation to plan and develop a strategic response to these challenges.

2.2 The corporate plan reflects the continuing challenge we face to ensure our processes and procedures are fit for purpose and are delivering the standards of quality and timeliness we expect. We are proposing to make significant investment in both our staff and the systems they are reliant upon to ensure we continue to develop our effectiveness and efficiency.

2.3 Our work to implement the new standards for registered pharmacies and the associated inspection model and enforcement regime will continue to be a major area of focus for the GPhC in the first year of this rolling corporate plan and beyond.

2.4 We have an ambitious programme of work to assess and develop a cost effective model of revalidation.

2.5 Work is already underway to ensure that both the quality and experience of pre-registration education is appropriate and takes into account possible changes to funding and structures within the education of pharmacists. Alongside this
initiative we will also be carrying out a significant amount of work to identify necessary improvements to the education and training, both pre and post registration of pharmacists and pharmacy technicians.

2.6 As pharmacy services change, be it in hospital, community, primary care or other sectors across Great Britain, so must regulation keep pace and reflect those changes. The corporate plan sets a clear focus on planning for future changes as well as current initiatives. We aim to ensure we are taking into account changing external political, economic, social and technological factors, such as the development of more online services, as we develop our regulatory policy.

2.7 The corporate plan also reflects the need to take into account and be flexible in how we prioritise our work depending on the analysis and outcomes of the independent review into Mid-Staffordshire NHS Foundation Trust as well as Department of Health initiatives such as the ‘rebalancing of medicines legislation and pharmacy professional regulation’, launched jointly by the Chief Pharmaceutical Officers in 2012.

2.8 The corporate plan, once approved by Council, will provide the basis for finalising directorate-level operational plans to be used by the directors and chief executive in monitoring the performance of the organisation and ensuring accurate reports are presented to Council.

3.0 Equality and diversity implications

3.1 As with the key priorities in the strategic plan itself, the suggested projects and initiatives have equality and diversity aspects which will need to be analysed and reflected appropriately. A clear theme running through the corporate plan is our aim to improve and enhance our capability to capture and analyse data from our regulatory work. This will, in turn, support our equality, diversity and inclusion work. In November 2012 the Council agreed a revised Equality Diversity and Inclusion Scheme and noted the accompanying action plan for 2012-14.

3.2 The strategic plan specifically highlights the diversity in healthcare and pharmacy within and between the countries of Great Britain and gives priority to our understanding and engaging effectively with different contexts in England, Scotland and Wales. This understanding and engagement must underpin and inform all our work to fulfil the tasks in the corporate plan. The Council’s devolution commitment is set out in the GPhC Devolution Policy and fully reflected in the draft plan.
4.0 **Risk implications**

4.1 As with the strategic plan, having a corporate plan helps to reduce the likelihood of the GPhC investing time and resources on activities and work which do not fall within the strategic priorities. The plan will also inform our risk management work.

5.0 **Communications implications**

5.1 The corporate plan will inform day to day operational and corporate communications as a source of authoritative information about how the organisation intends to fulfil the Council’s aims and priorities.

5.2 In addition to supporting clear internal communications about the organisation’s priorities, the corporate plan will also be used to support external communications materials which seek to describe our work and priority activities.

6.0 **Resource implications**

6.1 It is recognised that the scope and volume of work included in the corporate plan is significant. The priority aims and activities have been mapped against the proposed Budget for 2013/14 and will need further review in subsequent years.

6.2 The accumulation of a prudent level of reserves by the start of the period covered by the corporate plan and an anticipated generation of surpluses gives reassurance to Council that sufficient resources will be available if, for example, external factors require us to significantly amend or update our priorities. Our intention would always be to fund new projects or initiatives out of efficiency gains delivered as part of our work to improve our efficiency and effectiveness.

6.3 It should be noted that income and expenditure beyond 2013/14 is a forecast of what we expect at this stage to propose by way of budget. It assumes no rises in fees for any class of registrant as explained in the budget paper also considered at this meeting. However, we do acknowledge that the development of the new inspection model for pharmacies and any additional responsibilities and activity will need to be analysed and where necessary fees adjusted in future years. Further, more precise information regarding corporate plan activities and their associated costs will be required and will evolve as the plan rolls forward over time (as a natural part of the annual budgeting process) to inform future financial analysis.
Recommendation

The Council is asked to agree the draft corporate plan, subject to any amendments.

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31 January 2013
CORPORATE PLAN
2013 - 2016
Introduction

This is the General Pharmaceutical Council (GPhC) corporate plan for 2013-2016. It summarises how the GPhC plans to deliver the priorities set out in the strategic plan 2013-2016.

The strategic plan, under which this corporate plan sits, explains our history and sets out our analysis of how current and anticipated external factors shape our work. The corporate plan needs to be read with that wider context in mind, as those factors will influence the detail of how we deliver our strategic goals.

The chief executive is responsible for delivery of the plan and accountable to the Council for that. The Council will review and update the plan each year to ensure it reflects the changing external environment, as well as the knowledge and learning we acquire as the organisation matures.

Overview

Our three year strategic plan, laid before Parliament in September 2012, outlined what we see as the context in which pharmacy, and pharmacy regulation, operates.

There is strong support from policy makers in England, Scotland and Wales for a greater role for pharmacy in contributing to the quality of health services and public health outcomes for patients. Regulation plays its part by ensuring the continuing confidence of the public and policy makers that pharmacy services and the pharmacy professionals who provide them are safe and of a high quality.

No regulatory body in any field can presume that the policy or business case for regulation is self-evident, and we do not take public, professional or political support for pharmacy regulation for granted. We are committed to carrying out the task which legislation sets for us in a way which adds – rather than subtracts – value to pharmacy and to healthcare more widely. This includes expecting scrutiny and to be held accountable for our performance.

Our strategic plan and our corporate plan reflect the overriding priority we give to patient safety.

As our strategic plan makes clear, our view is that professionalism offers the best protection for patients and that a system of proportionate and effective regulation is an essential element that underpins professionalism and enhances:

- individual registrants’ capacity and confidence positively to embrace and live up to their professional responsibilities; and
- pharmacy’s collective commitment to professionalism.

And so our strategic plan sets out a clear statement of our intentions in that regard.
As a modern regulator, we seek to review and challenge the way we carry out activities within our core professional regulatory responsibilities; ensuring they continue to be as effective and efficient as possible.

We have dual roles as the pharmacy regulator; regulating both pharmacy professionals and the system for managing and delivering pharmacy services from registered pharmacies.

A key requirement for us is to utilise better the information we hold and acquire in carrying out these dual roles. We will use it to inform our assessment of risk within pharmacy and to ensure we improve our efficiency and effectiveness.

During the corporate planning period we will increasingly seek to use information and intelligence to ensure our work is informed by risk and is a proportionate response. We are committed, through the publication of our new standards for registered pharmacies and the implementation of a new inspection model, to be clear about what we expect from owners and superintendents of registered pharmacies and to develop a model which is clear on the standards we require all pharmacies to meet as well as providing a framework for improvement and innovation.

We also recognise that patients and the public will expect us to work effectively with other national and local organisations, including other regulators. Our aim is to ensure that our work in protecting the public is not only informed by information and intelligence we hold, but also that of others, being mindful also of the need to keep to a necessary minimum the burdens we might place on those we regulate.

**Our approach**

Our corporate plan reflects the five overarching priorities in our strategic plan. Under each of those priorities we identify work already underway, our key objectives and the targets we intend to meet for the first year of this corporate plan, 2013/14, as well as expected areas for further activity in 2014/15 and 2015/16.

Specific activities to be carried out by teams will sit in operational plans, but the corporate plan sets out key aims and objectives for the GPhC under each of the core strategic priority areas for the relevant period. The strategic priorities are:

1. Deliver our core regulatory services in a way that is fit for current and future purpose
2. Strengthen our capability to measure and improve the efficiency and effectiveness of our operational performance
3. Communicate and engage effectively with key stakeholders
4. Anticipate and respond to developments in pharmacy and healthcare
5. Make sure that we have the right people in place, with the right culture and organisational policies and procedures
Strategic priority 1

Deliver our core regulatory services in a way that is fit for current and future purpose

Our current focus

We have made significant progress to improve the way we deliver our core regulatory services. We have enhanced fitness to practise case handling including the introduction of new quality assurance systems and we have closed almost all of our legacy cases and improved the timeliness of our handling of fitness to practise cases as we work towards our aim of 95% of cases closed within 12 months.

We have developed and published new standards for registered pharmacies and have made good progress towards the development of a new inspection model with significant input of pharmacy professionals and patients.

Our registration assessment process has been fully revised with additional centres, procedures and use of pharmacy schools to undertake invigilation. This resulted in an overall satisfaction rate of 94.8% from candidates.

Enhancements have been made to the quality of the registration assessment by making clinical application the focus of papers. In 2014 more complex clinical scenarios will be introduced through additional question types. These developments have been overseen by the Board of Assessors, which has its own development programme.

Recent registrants have been recruited to accreditation teams, in order to bring a different perspective to the GPhc's work in this area.

Improvement in renewal communications and processes resulted in a 98.8% success rate across both registrant types for the 2012/13 peak renewal cycle.

We have selected a preferred systems application suite, following an extensive planning and due diligence exercise, as part of our work to overhaul and update our database and workflow systems.

Our priority objectives and targets for 2013/14

We will:

- Continue to invest in our fitness to practise processes aiming to make significant progress to reach our target of 95% of cases closed within twelve months by March 2014. This will be achieved by undertaking an ‘end to end’ lean review of our fitness to practise case management process to identify efficiencies within the way we do our work;
• continue to review the quality of fitness to practise case outcomes, building on the positive assessment provided by the Professional Standards Authority’s initial stages audit of our fitness to practise procedures;

• consult on a review of our indicative sanctions guidance for fitness to practise decision making which is critical to support consistent and appropriate outcomes. We expect this work and the new guidance to be completed by the end of 2013;

• further develop and then implement our new inspection model. We expect to have completed all our engagement and development work on the inspection decision framework by October 2013 and be in a position to implement the new model fully within the business year 2013-14;

• develop public inspection reports against the new standards for registered pharmacies, which will be rolled out once our new enforcement powers are in place. Preparatory engagement and testing work with patients and the public, already underway, will be completed in 2013;

• continue to develop our approach to revalidation. We will build on the engagement and development work already underway with stakeholders. We expect to complete planned research in 2013 before more detailed testing and piloting in 2014/15;

• review our current Continuing Professional Development (CPD) model both in terms of outcomes and the efficiency and effectiveness of the current CPD call and review process. We expect to complete an initial review and develop recommendations for Council by the end of 2013/14;

• initiate a review of our core standards of conduct, ethics and performance, carrying out preliminary scoping work before a full engagement and consultation in 2014/15;

• build on work already underway to review issues within the pre-registration training year. We intend to carry out a survey of all pre-registration trainees in 2013 to assess both the experience and effectiveness of the training year and will publish our analysis of the survey and other forms of feedback;

• bring forward before the end of 2013 specific proposals to enhance current mechanisms of assurance of the pre-registration training year, including guidance which will be developed in light of feedback from both pre-registration trainees and tutors;

• provide enhancements in 2013 to the quality and efficiency of our delivery of the registration assessment through the procurement of new exam question software and enhancements to public reporting of analysis of the assessment through the Board of Assessor’s regular reports to Council;
• develop a database for the registration of pharmacies and an online portal for pharmacy owners, to capture and report on key additional data collected to support the new inspection model and associated policy development; and

• undertake comprehensive planning of the development for the new core registration database to support operational improvements and data analysis.

**Forward planning for 2014/15 and 2015/16**

Much of our work in 2014/15 and 2015/16 will be dependent on external factors including decisions by ministers on the Law Commissions’ review, the ‘rebalancing’ initiative and the proposals from Modernising Pharmacy Careers in England and any related proposals in Scotland and Wales. Key areas of work will include:

• The review of the core standards of conduct, ethics and performance;

• further scoping and piloting of revalidation models;

• enhancements and refinements to the new inspection model based on enhanced evidence and data leading to greater intelligence-led regulation of pharmacies;

• enhancements to our fitness to practise processes including possible changes to the structure and operation in light of recommendations from the Law Commissions’ review and subsequent legislation;

• further work to improve and enhance our role in the quality assurance of pharmacy education including preparing for any changes to the funding and structure of pre-registration education and training; and

• implementation of new registration processes, and supported by the development of the new core register database enhancements to the way we are able to extract, analyse and report on key data we hold.
Strategic priority 2

Strengthen our capability to measure and improve the efficiency and effectiveness of our operational performance

Our current focus

We have made steady progress to identify and deliver improvements across each of our statutory functions, for example, through our focus on customer service and the introduction of quality assurance systems for key functions. We continue to make improvements in our registration processing, which is evidenced by the record number of renewals in our peak renewal period at the end of 2012.

This work is underpinned by the improvements we have made to performance monitoring across our core regulatory services and the regular reporting to Council which provides for enhanced scrutiny of our operational performance.

For example we have demonstrated learning from difficulties experienced in the operation of the registration assessment in 2011. We successfully implemented changes to improve the experience of candidates in 2012, and continue to work closely with relevant stakeholders as we continue to identify future challenges and how best to respond to them.

We have also developed strategy for Equality Diversity and Inclusion (EDI) data monitoring and data analysis across the organisation, in order to help ensure we are implementing EDI best practice within the organisation.

We have also realised significant efficiency savings in our fitness to practise operations as well as other savings gained from reducing costs in publications.

Our priority objectives and targets for 2013/14

We will:

- Review and improve how we capture, code and use data and information across the organisation to produce more transparent information about our regulatory activities. We will complete work to ensure consistent coding of fitness to practise cases both in relation to referrals and case classification. This will be completed in 2013;

- develop and enhance our EDI data monitoring to enable analysis and policy review across the organisation in 2013

- review how we work with other regulatory bodies and holders of information to avoid duplication of information capture and burden on registrants and others, where possible. We hope to complete the development of a Memorandum of Understanding with the NHS Commissioning Board by April 2013 as well as
continuing to strengthen our collaboration with regulators with whom we share
information such as the Care Quality Commission, Healthcare Inspectorate
Wales, Healthcare Improvement Scotland and the Medicines and Healthcare
products Regulatory Agency

- deliver short term IT improvements and comprehensive business
requirements as part of the preparation to the transition to a new software
solution which provides integrated and effective functionality across the GPhC
and will replace our legacy systems

- procurement of new examination question bank software to enable us to
deliver efficiencies in the way we prepare the registration assessment. This
will be completed in 2013

- improve further the registration assessment experience by increasing number
of venues and improving the availability and allocation of adjustments sites

This approach to improve our use of data will help us achieve our goal to ensure,
where possible, our work is informed by risk to patients

Forward planning for 2014/15 and 2015/16

- We will increasingly look to use data and information to drive both policy
development and operational efficiencies.

- We will also strive to publish greater data about each of our regulatory
functions to support our commitment to transparency to both patients and the
public and registrants as well as contribute to wider policy analysis and
development

- We will carry out further work as part of the roll-out of the new applications
software solution
Strategic priority 3

Communicate and engage effectively with key stakeholders

Our current focus

We believe the quality and effectiveness of our work is enhanced when all those with a key interest are involved in the development of policy and can influence how we regulate.

Our current focus has been to ensure that we communicate effectively our new approach to regulation of pharmacies and involve others, including pharmacy professionals and patients and the public, in the development of our new inspection decision framework and public reporting of inspections, as part of the development of our new inspection model.

Ensuring our new inspection decision framework accurately reflects what is happening in registered pharmacies and ensuring published inspection reports are useful for patients and users of pharmacy services remains a key priority for the GPhC.

We have undertaken numerous activities to engage all interest groups in key initiatives such as revalidation.

We have developed comprehensive engagement mechanisms such as our regular corporate publications, which have tested for accessibility with focus groups as well as developing e-reference groups to ensure we are encouraging feedback on all GPhC consultations including specific reference groups for England, Scotland and Wales.

We have enhanced our capability and capacity for communications and engagement activities, including expanding our use of digital and social media techniques and training GPhC staff as facilitators who can work with patients and the public.

Our priority objectives and targets for 2013/14

We will:

- Organise a programme of engagement activities in the second half of 2013 to work with those affected by our new inspection model and develop communications materials to support this work as part of implementation planning;

- develop enhanced online and paper based tools to monitor the effectiveness of all our mechanisms to involve and engage with stakeholders with the aim of improving this area of our work;
• assess the survey of registrants planned for the first half of 2013 to inform our communications and engagement work;

• carry out comprehensive engagement with patients and the public in advance of key initiatives in 2013/14 including the launch of public reporting of inspections as well as preparations for formal consultation on core professional regulatory standards for pharmacists and pharmacy technicians in 2014;

• expand the use of social media techniques to both inform and seek views from registrants, stakeholders, patients and the public;

• review the use and effectiveness of our suite of communications tools including Regula+e, our core publication for registrations, and Upda+e, our stakeholder e-bulletin; and

• build on our learning points feature in Regula+e to explore more effective and innovate ways of promoting good practice for registrants, including launching an online learning tool, Contempla+e.

Forward planning for 2014/15 and 2015/16

• We will have in place systems and processes to make sure that our stakeholders have opportunities to inform our work and our policy development, particularly as external developments progress, such as the ‘rebalancing’ initiative and the Law Commissions’ review into the legislative framework for health professional regulation.

• We will consider opportunities to provide more transparent reporting of our work including thematic reviews based on data we hold from inspections and areas such as fitness to practise or the quality assurance of education; and

• Further work will be undertaken with external organisations and stakeholders across England, Scotland and Wales to ensure that pharmacy regulation continues to be consistent across Great Britain and reflects local health and care delivery structures, regulatory framework and patient engagement systems.
Strategic priority 4
Anticipate and respond to developments in pharmacy, healthcare and regulation

Our current focus

There are far-reaching reforms either being introduced or on the horizon in healthcare in each of the three countries of Great Britain. The role of pharmacy is changing and more is being expected of pharmacy and pharmacy services. Reviews of the way health services are delivered, as well as major inquiries such as the Francis Report into Mid Staffordshire NHS Foundation Trust in England, are going to have an impact on healthcare regulation and the wider healthcare system.

Against this backdrop, we are pursuing an ambitious agenda to develop the regulation of pharmacies, as distinct from our role regulating pharmacy professionals.

Our new regulatory framework for registered pharmacies has been developed to ensure that we can provide assurance to patients and the public about the standards required in pharmacy and has the flexibility to ensure that we are able to take into account and respond effectively to innovations in pharmacy which comply with the law and do not breach our standards.

As the role of pharmacy changes across Great Britain, so must the pre and post-registration education needs of the pharmacy team. We have contributed to discussions about the future structure and funding of pharmacy education in England through the Modernising Pharmacy Careers sub-group, and have begun the necessary preparatory work for consequential changes required in the quality assurance of education. We are working closely with those leading similar discussions in Scotland and Wales and have already begun planning for the establishment of major workstreams in education and adding additional resources.

We have significant work to do to understand better the impact of the establishment of a wholly new registrant group in pharmacy technicians including assessment of the relatively new knowledge and competency based qualification and how these requirements may change in a relatively short period.

We have initiated plans to survey the GB register of pharmacists and pharmacist technicians to enable us to establish base-line information which, in turn, will help us to develop trend analysis and consider future developments within the workforce which we will need to respond to.

We have contributed to early discussions on the ‘rebalancing’ initiative announced by the Chief Pharmaceutical Officers for England, Scotland and Wales which has far reaching implications for the role of the Council. We will need to allocate significant resources to ensure we contribute effectively and appropriately to discussions and
the development of proposals from the UK Government and devolved administrations.

The Law Commissions’ review of the legal framework in which health professional regulators work is likely to be another significant focus in the second half of the corporate planning period with a formal consultation and draft Bill expected in 2014.

We have continued to argue for changes to the European Recognition of Professional Qualifications Directive to ensure that it is revised to enhance patient protection and that appropriate checks, such as those on language competency, can be carried out by the GPhC for registrants from the European Economic Area.

We continue to monitor and assess wider debates on the role of regulation and making the positive case that a strong sense of professionalism is the biggest defence against poor care. We will respond to the report from the independent public inquiry into Mid-Staffordshire NHS Foundation Trust and explain what role we can play in protecting patients and promoting the health and safety of those using services from pharmacists, pharmacy technicians and from a registered pharmacy.

**Our priority objectives and targets for 2013/14**

We will:

- Develop guidance to support our new standards for registered pharmacies. This includes guidance which sets out issues and requirements in relation to those pharmacies that intend or are providing services over the internet and those registered pharmacies who undertake manufacturing of medicines. This guidance will be developed by October 2013 with further guidance relating to the supply of Pharmacy medicines expected to be published sometime within the 2013/14 planning year;

- we have also develop related to work to consider future developments of service models, including those over the internet within healthcare and pharmacy and the impact that may have on necessary work to provide assurance to patients and the public about the services provided. This work will feed into joint initiatives with other regulators as well as updated information and internal and external guidance in relation to registration of pharmacies in 2013;

- we will also consider how best to monitor and track the impact of the new standards and inspection model through research and evaluation. This is likely to be initiated in 2013 and continuing into 2014;

- develop our own capability to capture, interrogate and publish assess data from fitness to practise, inspections and other areas of our regulatory work;

- take further steps to ensure we develop formal and informal arrangements with other holders of information to enable us to assess risk better and
respond to concerns about the quality of services from registered pharmacy professionals or registered pharmacies;

- develop a comprehensive workstream to build on current planning work for potential changes to the funding and structure of pharmacist education and training in Great Britain;

- build on work already in place to engage and develop formal relationships with Health Education England and the Local Education and Training Boards in England as part of necessary preparatory work for the development of an integrated five year pharmacy degree in England;

- continue to work with the Scottish and Welsh Governments to ensure we take into account their own plans in relation to the funding and structure pre-registration pharmacy education and training;

- monitor and undertake necessary work to consider the impact of the new pharmacy technician qualification and the establishment of the new registrant group. This work will link to both the ‘rebalancing’ initiative, changes to pharmacy education and training as well as wider public policy developments in relation to the role of pharmacy and the pharmacy team;

- review how best to ensure our work to quality assure pharmacy education takes account the wider changes to the pharmacy workforce and the role of the regulator in pharmacy education for both pharmacist, pharmacy technicians and the wider pharmacy team;

- further analyse, through the all registrant survey, issues within the pharmacy team (as described by Council in September 2012); and

- develop guidance to support those working in teams and to further enhance clarity around accountability following the introduction of compulsory pharmacy technician registration in 2011.

**Forward planning for 2014/15 and 2015/16**

- We will undertake further research and data analysis to develop our inspection and regulation of registered pharmacies in light of any learning from the first year of the new model being implemented including how it can be made more proportionate and informed by risk.

- Significant work will be required to ensure we are linking with new health delivery structures in England, including new commissioning, provider and regulatory structures in the NHS.
Strategic priority 5

Make sure that we have the right people in place, with the right culture and organisational policies and procedures

Our current focus

We have developed a behavioural framework which describes the way we want all staff to behave both in dealing with each other and with customers, introduced a new approach to individual performance review and have linked these elements into a new remuneration structure.

We have continued to put significant effort into embedding a coaching culture and have begun an ambitious programme for learning and development which will build staff capacity, support future succession planning and support our aim to devolve accountability to the lowest safe staff level.

Our priority objectives and targets for 2013/14

We will:

- Enhance our human resources and organisational development functions;

- enhance the effectiveness of our new e-learning training platform and develop a coaching culture in the organisation as part of a new programme of learning and development assisting with succession planning and talent management;

- improve internal communications, in response the annual staff survey, including introducing a distinct internal communications function in the communications team;

- continue to use an annual staff survey to gain feedback and respond, as well as work with other groups such as the Employee Forum;

- develop, design and deliver a council development support framework recognising the importance of board development;

- continue to invest in staff training across a range of disciplines, including for managers and aspiring managers as well as technical training, particularly as we develop our new regulatory work on registered pharmacies; and

- we are committed to making a decision on future accommodation needs in preparation for the end of our current lease in September 2014. Any decision will require significant planning and resourcing.
Forward planning for 2014/15 and 2015/16

- We will review the success and adherence to the behavioural framework as well as specific organisational development goals such as our desire to build our internal coaching capability.

- We will review the new remuneration structure to ensure it remains fit for purpose and continue to assess our longer term workforce planning needs.