Consultation on CPD Framework & Rules

Purpose
To agree to consult on the draft CPD framework and draft CPD rules.

Recommendations

The Council is asked to agree to:

i. consult on the draft CPD rules; and

ii. publish the consultation document on the draft CPD framework and draft CPD rules (Appendix 1).

1.0 Background

1.1 Under the Pharmacy Order 2010, continuing professional development (CPD) is a statutory requirement for all registrants. Article 43 of the Order requires the Council to:

- Set and publish standards for CPD;
- Publish the criteria by which compliance with the standards will be monitored;
- Adopt and maintain a framework relating to the requirements and conditions to be met by registrants in respect of their CPD;
- Make rules with respect to registrants who fail to comply with the requirements and conditions of the CPD framework or make a false declaration about their compliance.

1.2 The Council set and published standards for CPD in June 2010. The Council then considered the draft CPD framework in September 2010 and agreed to consult on the draft framework and draft CPD rules as a single exercise. This should enable interested parties to have a clearer picture of the proposed CPD
requirements and help to inform responses. The Council also agreed the framework for the purpose of consultation, subject to the inclusion of minor revisions. These have been incorporated in the draft framework as shown in the consultation document at Appendix 1.

1.3 Given that the consultation will cover the Christmas and New Year period, it is proposed to consult for 14 weeks.

1.4 The coverage of both the CPD framework and the rules is largely dictated by the Pharmacy Order. The framework brings together the GPhC’s CPD requirements and the criteria by which compliance will be monitored. Guidance will be provided to registrants in the CPD Plan & Record document. The CPD rules have a narrower focus, dealing with the circumstances in which the Registrar may impose remedial measures or remove an entry or an annotation from the register. This is in keeping with the principle that rules should cover actions which may impact on a person’s human rights, for example on their registration status. Council members were invited in August 2010 to provide informal comments on the draft CPD rules. However, the Council has not had a full discussion on the approach described in the draft rules, which assumes that a process of the type described should provide an efficient and effective means of dealing with gross non-compliance with the CPD requirements.

1.5 The comments received from Council members have informed the consultation draft of the rules. In particular, the structure of the rules has been changed to make clear that the Registrar has the option of imposing remedial measures rather than proceeding to removal from the register. It is envisaged that a registrant who submits a CPD record which does not meet the requirements would generally be given an opportunity to improve, so remedial measures would be the usual first step. There could nevertheless be instances where it might be appropriate to seek removal without first imposing remedial measures, such as when a registrant simply does not submit a CPD record despite repeated requests, so it is appropriate that both options should be available to the Registrar. This flexibility should allow a proportionate approach and reflect the objective of the rules, which is to secure compliance rather than to punish.

2.0 Equality and diversity implications

2.1 CPD requirements have significant equality and diversity implications. Processes for enforcement need to be applied in ways which are fair, bearing in mind the range of work patterns, types of practice and life circumstances amongst the GPhC’s registrants. The CPD team has developed knowledge and skills in dealing appropriately and proportionately with registrants who require additional support or time to submit their CPD record for review, for example because of illness or disability. Legislation relating to equality and diversity will need to be
monitored on an ongoing basis to ensure that the GPhC remains legally compliant. An equality impact assessment on the draft CPD rules will be published on the GPhC’s website during the consultation period.

3.0 Communications implications

3.1 All registrants have an obligation to undertake and record CPD. They therefore need to be made aware of the CPD requirements, covered by the framework, and the potential consequences of failure to meet those requirements, as set out in the rules. All registrants have received a copy of the CPD standards. The consultation on the framework and rules should help to build understanding of CPD requirements but there will also be a need for material providing explanation and guidance, such as the CPD Plan and Record document.

4.0 Resource implications

4.1 The implications of this policy can be met within anticipated resources.

5.0 Risk implications

5.1 The public expects that health professionals will keep themselves up to date in their chosen fields of practice. It is therefore important that the GPhC has policies and procedures to ensure that its registrants are engaged in continuing professional development. The CPD framework and rules are requirements under article 43 of the Pharmacy Order 2010 and must therefore be in place for the GPhC to be fully compliant with its statutory responsibilities.

5.2 Registrants have had an opportunity to become accustomed to undertaking and recording CPD, using the systems put in place by the RPSGB. The majority of registrants who have had their records reviewed have achieved a high standard of attainment against the review criteria. The draft framework considered by the Council in September is based around the existing CPD recording system and should not therefore present significant new challenges in implementation. The additional information included in the framework, together with the consultation process, should help to reduce any risk of ambiguity in the review process prior to the implementation of the CPD rules.

Recommendations

The Council is asked to agree to:

i. consult on the draft CPD rules; and

ii. publish the consultation document on the draft CPD framework and draft CPD rules (Appendix 1).
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20 October 2010
DRAFT

Consultation on the draft CPD framework and rules

1 November 2010 to 7 February 2011
Consultation on the draft CPD framework and rules

Introduction

The General Pharmaceutical Council (GPhC) is the regulator for pharmacists, pharmacy technicians and pharmacy premises.

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 the services provided at a registered pharmacy.

Our principal functions include:

- setting standards for conduct, ethics, proficiency, education and training, and continuing professional development (CPD);
- establishing and promoting standards for the safe and effective practice of pharmacy at registered pharmacies;
- establishing fitness to practise requirements, monitoring pharmacy professionals' fitness to practise and dealing firmly and fairly with complaints;
- approving qualifications for pharmacists and pharmacy technicians;
- maintaining a register of pharmacists, pharmacy technicians and pharmacy premises.

We will aim to ensure that regulation is fair and proportionate – that is, in line with the level of risk posed to public health, safety and wellbeing – and not over-burdensome. We want it to be flexible enough to respond to the changing demands made of the profession and to allow for innovation at the same time as maintaining high quality practice.

The GPhC has been given the responsibility, in the Pharmacy Order 2010 (‘the Order’) to make rules in a number of areas including CPD. The Council has also been given responsibility for developing a CPD framework.

This document sets out the Council’s draft CPD framework and rules and invites the views of stakeholders on the proposals.
1. **Continuing Professional Development**

1.1 Continuing Professional Development (CPD) is a process that all registrants are engaged in throughout their professional life to maintain their competence. A registrant’s CPD must have relevance to the safe and effective practice of pharmacy, within the scope of their practice.

1.2 The GPhC has a responsibility to publish:

- CPD standards;
- a CPD framework;
- CPD rules.

To accompany these, the GPhC has also published a document titled ‘Plan and Record’ which can be found on our website [www.pharmacyregulation.org](http://www.pharmacyregulation.org) and provides guidance on what registrants need to do to meet the GPhC’s CPD requirements. ‘Plan and Record’ contains information on:

- how to meet our standards;
- the activities that may lead to learning that could be included in a CPD record;
- the CPD cycle;
- good practice criteria for recording CPD;
- approved formats for CPD recording.

1.3 The CPD standards were consulted on earlier this year, and were agreed by the Council in June. All registrants should have received a copy of the CPD standards at the end of August as part of their ‘GPhC and Me’ pack. The standards are also available on the GPhC website [http://www.pharmacyregulation.org/regulatingpharmacy/standardsandquality/continuingprofessionaldevelopmentcpd/index.aspx](http://www.pharmacyregulation.org/regulatingpharmacy/standardsandquality/continuingprofessionaldevelopmentcpd/index.aspx).

1.4 The CPD framework sets out the requirements and conditions that must be met by registrants in respect of their CPD.

1.5 The CPD rules set out what happens if a registrant does not comply with the CPD requirements or makes a false declaration about their compliance.

1.6 This consultation seeks your views on the content of the CPD framework, in particular the criteria against which registrants’ CPD will be judged, and the content of the CPD rules.
2. CPD Framework

2.1 The Pharmacy Order 2010 sets out the need for a CPD framework and details its content.

2.2 The CPD framework must include:

- the amount and type of CPD that a registrant must undertake;
- the information that a registrant must provide about their CPD and the form and way in which it needs to be given;
- the times at which a registrant must submit their CPD record, including any CPD that relates to an annotation to their registration;
- a requirement that a registrant’s CPD is relevant to the safe and effective practice of pharmacy, within the scope of their practice;
- a requirement that a registrant’s CPD is relevant to a learning need for them which relates to the current scope of pharmacy practice, including any particular specialisation of that registrant and their practice environment.

2.3 The framework also applies to visiting practitioners ie. pharmacists or pharmacy technicians from the EEA or Switzerland who are providing temporary or occasional services in Great Britain. However, the framework must take account of the fact that visiting practitioners are fully qualified to practise in their home States and must allow CPD to be undertaken outside Great Britain.

2.4 We welcome your views on the draft framework in general; however we have set out below some specific areas where we are seeking your views.

2.5 We are not seeking views about the amount and type of CPD that a registrant must undertake as this information is set out in the CPD standards, which have already been consulted on and agreed.

2.6 The draft framework can be found in Appendix 1.

CPD Recording Format

2.7 The GPhC intends that the recording format should continue to be structured according to the cycle of reflection, planning, action and evaluation which was introduced to the pharmacy profession from 2002 onwards, accompanied by a programme of support and facilitation. CPD recording based on a cycle of reflective practice is therefore familiar to most registrants and the GPhC’s education and training standards require prospective registrants to be introduced to it prior to registration.

Question 1

Do you agree that the recording format for CPD should continue to be structured according to the cycle of reflection, planning, action and evaluation?
Calling CPD Records for Review

2.8 The GPhC intends to continue the existing arrangements for calling in and reviewing registrants’ CPD records. We propose that:

- registrants will normally be asked to submit their CPD record every five years but some may be asked to submit their record more frequently;
- if a registrant has a good reason why they cannot meet the deadline for submission of their CPD record (for example, if they or a close family member is seriously ill) they must contact us in advance of the deadline to request an extension. All requests for extensions must be supported with relevant evidence;
- registrants must notify us of the reasons for any gaps in their CPD record, for example because of a period of maternity leave, before submitting their record for review and must support this, where possible, with relevant evidence.

Question 2
Do you agree that, for most registrants, CPD records should be reviewed every five years?

Criteria for Reviewing CPD records

2.9 The criteria for reviewing CPD records have been based on the CPD standards and the criteria for good recording practice and are designed to measure both the quantity of CPD undertaken and the impact it has had on practice. The criteria can be read in full in Appendix 1.

2.10 We have set out explicit measures against which registrants will be considered to have ‘passed’ or ‘failed’ our CPD requirements. We propose that:

- there are at least nine entries completed for each full year of the review period which are relevant to the safe and effective practice of pharmacy within the individual’s scope of practice, including any specialisations and the environment in which the individual practises.

2.11 To measure the extent to which pharmacy professionals are following the criteria for good recording practice, we propose that:

- at least three of the entries completed for each full year must start at reflection;
- entries must comply with the criteria for good recording practice. Collectively, the entries must demonstrate that at least half of the criteria for good recording practice have been applied.

Question 3
Do you agree with the proposed measures against which we will review CPD records?

Question 4
Do you have any other comments you wish to make about the content of the draft CPD framework?
3. **CPD Rules**

3.1 The CPD Rules set out what happens when a registrant fails to comply with the CPD requirements or makes a false declaration about their compliance.

3.2 The CPD Rules cover:

- the circumstances in which a registrant would be considered to have failed to meet the CPD requirements;
- the proposed remedial measures that could be imposed when someone has failed to meet the CPD requirements;
- the decision-making process and steps that must be taken prior to removing an entry or annotation from the register because of failure to comply with the CPD requirements;
- the power to suspend a person’s registration pending an appeal against a decision to remove them from the register;
- consequential amendments to the GPhC’s Fitness to Practise Rules to enable the Fitness to Practise Committee to hear cases where a registrant is considered to have failed to meet the CPD requirements.

3.3 We welcome your views on the rules in general; however, we have set out below some specific areas that where we are seeking your views.

3.4 The draft CPD rules can be found in Appendix 2.

**Failure to comply with the framework**

3.5 The CPD rules set out that a registrant would fail to meet the CPD requirements under the framework when, without a reasonable excuse, they fail to:

- make an annual declaration regarding their compliance with the CPD requirements;
- submit a CPD record for review in the form and manner set out in the CPD framework or by the time requested;
- adequately record the dates on which the CPD has been undertaken; or
- provide any other information about their CPD which is required under the framework.

3.6 A registrant would also be considered to have failed to meet the CPD requirements where:

- they have made insufficient entries in their CPD record;
- the entries in their CPD record do not demonstrate that the CPD is relevant to the safe and effective practice of pharmacy within the individual’s scope of practice, including any specialisations and the environment in which the individual practises;
• the record does not reflect any conditions imposed on the registrant’s practice by the Fitness to Practise Committee or, for a visiting practitioner, the relevant authority in their home State;
• the record does not reflect any additional CPD required by the Registrar following restoration to the register;
• the record does not reflect any remedial measures previously imposed under the CPD rules;
• the CPD record is otherwise inadequate, or not in a fit or proper state to be reviewed.

**Question 5**
Are there any other circumstances where a registrant would be considered to have failed to meet the CPD requirements that should be added to those listed in the draft rules?

**Proposed Remedial Measures**
3.7 Where a registrant has failed to comply with the CPD requirements or made a false declaration about their compliance, the GPhC may impose remedial measures, or may remove a registrant from the register, or remove an annotation to their registration.

3.8 The remedial measures that may be imposed include, but are not limited to, a requirement:
• to make entries in the form and manner specified in the CPD framework;
• to make entries that accurately reflect the CPD activities already undertaken by the registrant;
• to undertake additional CPD activities;
• to undertake additional CPD activities which relate to the safe and effective practice of pharmacy;
• to undertake additional CPD activities which relate to a learning need for the individual registrant that is relevant to—
  ◊ the current scope of pharmacy practice;
  ◊ any specialisation of the individual registrant; or
  ◊ the environment in which the registrant practises.

**Question 6**
Are there any other remedial measures that should be added to those listed in the draft rules?
The process for removal of an entry or annotation from the register

3.9 Where we intend to remove a person from the register, or to remove an annotation to their registration, we will send out a ‘notice of intention’. This will set out the grounds for the intention and supporting evidence. Registrants will be invited to make written submissions within 28 days and to indicate whether they wish the matter to be considered at a hearing.

3.10 If no submissions are received within 28 days, the registrant may be removed from the register, or an annotation to their registration may be removed.

3.11 When written submissions are received, the Registrar will consider these and may make further enquiries. The Registrar will then either:
   - determine that no failure has taken place and close the matter; or
   - provide the registrant with any further evidence obtained by the GPhC of the failure to meet the requirements and, if the registrant has not already requested a hearing, invite them to make further written submissions within 28 days and to indicate whether they wish the matter to be considered at a hearing.

The same process would apply for any further submissions made by the registrant within the 28 day period. The Registrar would then consider the submissions and evidence and determine whether or not the registrant had failed to meet the CPD requirements. Alternatively, if the registrant requested a hearing, the matter would be referred to the Fitness to Practise Committee.

3.12 The main processes covered by the draft CPD rules are illustrated in the flowchart on page 13.
Flowchart of main processes covered by draft CPD rules
Suspension from the register pending appeal
3.13 Where the Registrar has decided to remove a person from the register and that person appeals against that decision to the Appeals Committee, the Registrar would be able to suspend their registration pending the final outcome of the appeal.

Consequential amendments to the Fitness to Practise Rules
3.14 The CPD rules would amend the GPhC’s Fitness to Practise Rules1 to allow the Fitness to Practise Committee to hear cases where a registrant is considered to have failed to meet the CPD requirements.

Question 7
Do you agree with the procedure proposed for notifying registrants of the intention to remove them from the register or for removing an annotation relating to a specialisation and the subsequent stages prior to removal?

Question 8
Do you have any other comments you wish to make about the content of the draft CPD rules?

1 “Fitness to Practise Rules” means the General Pharmaceutical Council (Fitness to Practise and Disqualification etc.) Rules 2010, scheduled to S.I. 2010/1615.
The consultation process

We want to hear the views of registrants, patients, pharmacy owners and other stakeholders on our proposals. This consultation seeks opinions on the content of the draft CPD framework and CPD rules.

The consultation will run for fourteen weeks and will close on 7 February 2011. During this time we would welcome feedback from individuals and organisations.

We will send this document to a range of stakeholder organisations, including professional representative bodies and employers.

Further copies of this document are available to download from our website www.pharmacyregulation.org/getinvolved/consultations/currentconsultation/index.aspx or you can contact us if you would like us to send you a copy of the document in an alternative format.

Comments on the consultation process itself

If you have concerns or comments which you would like to make relating specifically to the consultation process itself, please send them to:

Email info@pharmacyregulation.org

Address CPD framework and rules consultation process, General Pharmaceutical Council, 129 Lambeth Road, London SE1 7BT

Please do not send consultation responses to this address

How to respond

You can respond to this consultation in a number of different ways:

online at www.pharmacyregulation.org/getinvolved/consultations/currentconsultation/index.aspx

or by completing the form at the end of the document and sending it by:

• email to insert e-mail address

• post to Draft CPD framework and rules, Consultation Response, General Pharmaceutical Council, 129 Lambeth Road, London, SE1 7BT
Report of this consultation

Once the consultation period is completed, we will analyse the responses we receive and the Council will take these into account when making its decisions. We will also publish a summary of the comments we receive and explanation of the decisions we have taken. This will be available on our website.
Response form for the consultation on the General Pharmaceutical Council draft CPD framework and rules

To complete the consultation response form online, go to our website

www.pharmacyregulation.org/getinvolved/consultations/currentconsultation/index.aspx

Alternatively, you can use the response form at the end of this document. Please send your completed form to:

email  e-mail address ; or

address  Draft CPD framework and rules, Consultation Response, General Pharmaceutical Council. 129 Lambeth Road, London, SE1 7BT

Responses must be received by 7 February 2011

Name

Contact address

Postcode

Contact telephone

Email

Confidentiality

Information provided in response to this consultation, including personal information, may be published or disclosed in accordance with the access to information regimes (these are primarily the Freedom of Information Act 2000 (FOIA), the Data Protection Act 1998 (DPA) and the Environmental Information Regulations 2004).

The General Pharmaceutical Council will process your personal data in accordance with the DPA and, in the majority of circumstances; this will mean that your personal data will not be disclosed to third parties.
Please indicate all the countries to which your comments relate

☐ Great Britain
☐ England
☐ Scotland
☐ Wales
☐ Other (please give details)

Are you responding

as an individual?

☐ as a pharmacy professional (please complete section A)
☐ as a member of the public
☐ as an allied health professional (please give details)

on behalf of an organisation?

☐ on behalf of a pharmacy organisation (please complete section B)
☐ on behalf of a non-pharmacy organisation (please complete section C)

A. Pharmacy professionals

If you are responding as a pharmacy professional, please supply the following details

☐ Pharmacist
☐ Pharmacy technician

Area of work
☐ Community pharmacy
☐ Hospital pharmacy
☐ Primary care
☐ Pharmacy education and training
☐ Pharmaceutical industry
☐ More than one area / Other (please give details)

B. Pharmacy organisations

If you are responding on behalf of a pharmacy organisation, please supply the following details
Type of organisation

- Professional body
- Regulatory body
- Education and training provider
- Employer
- Union
- Trade body
- Other (please give details)

Area of work

- Community pharmacy
- Hospital pharmacy
- Primary care
- Pharmacy education and training
- Pharmaceutical industry
- More than one area / Other (please give details)

C. Non-pharmacy organisations

If you are responding on behalf of a non-pharmacy organisation, please supply the following details

Type of organisation

- Professional body
- Representative body
- Regulatory body
- Education and training provider
- Employer
- Union
- Trade body
- Other (please give details)

Questions

We are particularly interested in your views on the following points, although we welcome comments on any issues that you wish to raise in the relation to the draft CPD framework and rules

Question 1
Do you agree that the recording format for CPD should continue to be structured according to the cycle of reflection, planning, action and evaluation?
Question 2
Do you agree that, for most registrants, CPD records should be reviewed every five years?
☐ Yes
☐ No
☐ Unsure

Comments

Question 3
Do you agree with the proposed measures against which we will review CPD records?
☐ Yes
☐ No
☐ Unsure

Comments

Question 4
Do you have any other comments you wish to make about the content of the draft CPD framework?

Question 5
Are there any other circumstances where a registrant would be considered to have failed to meet the CPD requirements that should be added to those listed in the draft rules?
☐ Yes
☐ No
☐ Unsure

Comments

Question 6
Are there any other remedial measures that should be added to those listed in the draft rules?
☐ Yes
☐ No
☐ Unsure

Comments
Question 7
Do you agree with the procedure proposed for notifying registrants of the intention to remove them from the register or for removing an annotation relating to a specialisation and the subsequent stages prior to removal?

☐ Yes
☐ No
☐ Unsure

Comments

Question 8
Do you have any other comments you wish to make about the content of the draft CPD Rules?
Appendix 1 to consultation document

Draft CPD Framework

Framework for continuing professional development

October 2010
Framework for continuing professional development

About us

The General Pharmaceutical Council (GPhC) is the regulator for pharmacists, pharmacy technicians and registered pharmacy premises in England, Scotland and Wales.

Introduction

Our standards for conduct, ethics and performance require all pharmacy professionals to maintain and improve the quality of their practice by keeping their knowledge and skills up to date and relevant to their roles and responsibilities. You should therefore undertake as much continuing professional development (CPD) as is necessary for you to able to practise safely and effectively. This document sets out the framework relating to the minimum requirements and conditions that must be met by pharmacy professionals in respect of their CPD.

The CPD requirements apply equally to all pharmacy professionals. They are not changed by factors such as part-time employment or working in a position of authority. You are expected to cover the full scope of your practice in your CPD record, including responsibilities such as being a superintendent pharmacist or pharmacist prescriber and roles in different settings such as industry and community pharmacy.

Each time you renew your registration you must complete a declaration agreeing that you will comply with the requirements and conditions of this framework. The CPD review mechanism is designed, in part, to monitor compliance with this declaration. When your CPD record is called for review it will be judged against the requirements of the framework. Failure to comply could put your registration at risk.

To help you to understand our CPD requirements we have also published a guidance document Plan and Record which can be found on our website www.pharmacyregulation.org. Please refer to Plan and Record for further information on:

- how to meet our standards;
- the activities that may lead to learning that could be included in a CPD record;
- the CPD cycle;
- good practice criteria for recording CPD;
- approved formats for CPD recording.
1. Amount and type of CPD

You must meet the standards for Continuing Professional Development set by the GPhC. This means that you must meet the following requirements.

1.1 Keep a record of your CPD that is legible, either electronically online at the website www.uptodate.org.uk, on a computer or as hardcopy on paper and in a format published or approved by us and carrying the CPD approved logo.

1.2 Make a minimum of nine CPD entries per year which reflect the context and scope of your practice as a pharmacist or pharmacy technician.

1.3 Keep a record of your CPD that complies with the good practice criteria for CPD recording published by us in Plan and Record and in appendix 3 of this document.

1.4 Record how your CPD has contributed to the quality or development of your practice using our CPD framework.

1.5 Submit your CPD record to us on request.

2. Information to be provided by registrants about CPD

2.1 Entries within your CPD record must:

- be relevant to the safe and effective practice of pharmacy, within the scope of your practice;
- address learning needs that are relevant to your current scope of pharmacy practice, including any specialisation and the environment in which you practise;
- be structured according to the CPD cycle of reflection, planning, action and evaluation as set out in appendix 1 of this document.

3. Calling CPD records for review

3.1 The GPhC may ask you to submit a CPD record for review at any time. Normally, this will happen every five years, but some registrants will be asked to submit their CPD records more frequently than this, for example if they have been required previously to undertake remedial measures following a review of their CPD record.

3.2 When you are asked to submit your CPD record for review, you will be given details of how to do this and how long you have to respond. If you do not submit your CPD record by the deadline given, without reasonable excuse, the GPhC may cancel your registration.
3.3 If you have a good reason why you will be unable to meet your deadline (for example, you or a close family member is seriously ill) you must contact us in advance of your deadline to request an extension. All requests for extensions must be supported with relevant evidence.

3.4 You must notify us of the reasons for any gaps in your CPD record, for example because you have taken a period of maternity leave, before submitting your record for review and supported, where possible, with relevant evidence.

4. Records of registrants’ CPD kept by the GPhC

4.1 The GPhC will keep a record of the outcome of every review of your CPD and the date that the review was completed. The date when the last review of your CPD was completed will be retained in our registration database. This does not necessarily mean that this information will appear on our online register.

4.2 Copies of CPD records submitted for review and a record of any supplementary information submitted or obtained during the review process will be retained securely and in accordance with Data Protection Act requirements for a period of 5 years after the review has been completed, after which the data will be destroyed.

5. Transitional arrangement for CPD entries recorded prior to the establishment of the GPhC

5.1 Continuing professional development was rolled out to pharmacy professionals from 2002 onwards. In 2005, the Royal Pharmaceutical Society of Great Britain (RPSGB) implemented an obligation under its codes of ethics for practising pharmacists and registered practising pharmacy technicians to maintain records of their CPD and to submit these records to the RPSGB on request.

5.2 In March, 2009, the RPSGB implemented standards and guidance for CPD under its revised code of ethics, ahead of the start of the call and review process later in 2009.

5.3 When your CPD record is called for review we will invite you to submit CPD entries for review that have been recorded over a period of 5 years prior to the date on which your record is called for review (we call this the review period). If you have been registered for less than 5 years when your CPD record is called for review, then your review period will cover the period from the date of your first registration as a practising pharmacist or practising pharmacy technician.

5.4 In cases where your review period includes any period before 27 September 2010, we would expect your CPD record to reflect the obligations and standards that were in place at that time. This means that if your review period includes any dates between 2005 and 2009 we would expect to see some entries in your CPD record between these
dates. If your review period covers any dates between 1 March 2009 and 26 September 2010, we would expect the entries made during this period to reflect the RPSGB standard of a minimum of nine entries per year.

6. Circumstances in which additional CPD activities may be required

6.1 We may ask you to undertake and record additional CPD activities if any of the following circumstances apply to you:

- your register entry has been restored following a period of removal and your application for restoration to the Register has been granted subject to you agreeing to comply with additional CPD requirements;
- a direction has been given by a Fitness to Practise Committee that your continued registration is conditional on you undertaking additional CPD activities.

7. Visiting practitioners (registered in parts 4 and 5 of the Register)

7.1 If you are registered with us on a temporary basis because you are registered as a pharmacist or pharmacy technician in another European state where you normally practise then we are able to take account of any continuing professional development that you are required to undertake in your home state.

8. Review of CPD records

8.1 CPD records submitted for review are reviewed against the requirements of the CPD framework. The review criteria are set out in appendix 2.

8.2 CPD rules set out the procedures that the GPhC will use for dealing with registrants who fail to comply with the requirements and conditions of the CPD framework. You will be regarded as having failed to comply with the requirements and conditions of the CPD framework if, without reasonable excuse:

- you have failed to make an annual declaration that you will comply with the requirements and conditions of the CPD framework;
- your CPD record has been called for review but you have failed to submit your CPD record by the deadline given;
- the information you have recorded about your CPD has not been recorded in the manner specified in the CPD framework;
- the number of entries in your CPD record is insufficient;
- there are insufficient entries in your record that are relevant to the safe and effective practice of pharmacy within your scope of practice, including any specialisations or the environment in which you practise;
You have submitted a CPD record which is illegible or is not in a fit and proper state to be reviewed;

Your CPD record does not adequately reflect any special conditions that have been placed on your practice by the GPhC, for example by the Fitness to Practise Committee or by the Registrar if your registration has been restored following removal.

8.3 If your record is not fully compliant with the requirements and conditions of the framework, you will be asked to improve your record within a set timescale. We may ask you to undertake additional CPD activities and/or to make additional entries in your CPD record. If there are significant deficiencies in your record and if you fail to improve it when asked, the GPhC may cancel your registration or remove an annotation to your register entry relating to a speciality.

8.4 If there are grounds for thinking that your CPD record is fraudulent or contains false or misleading information, we will launch an investigation and may deal with this under our fitness to practise procedures. This could result in your registration being cancelled.
Appendix 1 to draft CPD framework

CPD Recording Format

CPD entries within a CPD record submitted to the GPhC for review must be in the following format. If you send in entries written in any other format they will not be accepted.

Name of entry

Date entry is started

Reflection on practice (Identifying what you want to learn and why)

What do you want to learn?

How did you identify that you want to learn this?

What methods did you use to identify that you needed to learn this.

- Critical incidents
- Appraisal
- Peer review/talking to colleagues
- Personal interest
- Audit
- Feedback from users of service / products
- Reading
- Other
Planning your learning activities (*Identifying priorities*)

When do you need to have completed this learning activity by? (dd/mm/yyyy)? / /

Why is this learning important to you and your practice?

How important is it? (1=low, 5=high)

To you? 1 2 3 4 5  
To patients and the public? 1 2 3 4 5

To your colleagues? 1 2 3 4 5  
To your organisation? 1 2 3 4 5

What might you need to do in order to achieve this learning? (Consider the range of options for achieving your learning, including the different types of learning, and the advantages of disadvantages of each and choose the activity or activities that are most appropriate for you).
Action

What did you do to complete the activities in your plan, and when?

What have you learnt?


**Evaluation (reflecting on learning)** (Have you been successful, what are the benefits?)

To what extent did you learn what you wanted to? Fully ☐ Partly ☐ Not at all ☐

If you ticked fully or partly, give an example of how you have applied what you have learnt to your practice

If you ticked fully or partly, what have been the benefits to your practice/patients and the public?

If your learning has not been fully achieved, what has not been achieved?

If your learning has not been fully achieved, why has it not been achieved?

What are you going to do next? ☐ Nothing, I’ve learnt enough for what I need

☐ Review to see if I can complete what I want to learn within this CPD cycle

☐ Start a new CPD cycle and complete what I want to learn.

If this entry is complete, tick here ☐
Criteria for Review of CPD Records

1. A CPD record has been submitted to the GPhC in the time specified by the Registrar.

2. The CPD record is legible and has been submitted in a format published or approved by the GPhC as specified in appendix 1.

3. The CPD record contains entries covering the full period of the review, or, where there are gaps in the record, an adequate explanation has been provided.

4. There are nine entries completed for each full year of the review period which are relevant to the safe and effective practice of pharmacy within the individual’s scope of practice, including any specialisations and the environment in which the individual practises. At least three of the entries completed for each full year start at reflection.

5. Entries within the CPD record comply with the GPhC’s criteria for good recording practice (outlined in appendix 3). Collectively, the entries demonstrate that at least half of the good practice criteria have been applied.

Feedback will be provided to individuals confirming the areas of the CPD cycle where individuals are recording well and highlighting areas of the CPD cycle which, in the opinion of the reviewer, improvements to recording could be made.

The proposed threshold of 50% is based on the analysis of data for the first 6 months of the call and review process. 98.1% of those who had their records reviewed during this period achieved this standard. 80.3% of those who had their records reviewed met more than 75% of the criteria within the entries that were reviewed.
Criteria for good recording practice

Reflection
• There is a description of what the registrant wants to learn;
• There is a description of the relevance of the learning to the registrant’s practice;
• There is an explanation of the methods used to identify what the registrant wanted or needed to learn.

Planning
• There is a planned completion date indicating that the learning has been prioritised according to urgency;
• There is a description of why the registrant believes it is important for them to complete this learning that indicates that learning needs have been prioritised;
• There is a description of the different options that are available to meet the registrant’s learning objective
• There is a description of the registrant’s consideration of the appropriateness of the different options.

Action
• There is a description of the activities that have been selected to be undertaken from the different options;
• There is a description of what the registrant has learnt.

Evaluation
• There is a description of how the learning has been applied;
• There is a description of how the learning has benefited the registrant’s practice;
• Where the learning has not been fully achieved, there is a description of what has not been achieved;
• Where the learning has not been fully achieved, there is an explanation of why;
• Where the learning objective has not been fully achieved or not achieved at all, there is an indication of what the registrant is going to do next.
Appendix 2 to consultation document

Draft CPD rules

STATUTORY INSTRUMENTS

2011 No.

HEALTH CARE AND ASSOCIATED PROFESSIONS

PHARMACY

The General Pharmaceutical Council (Continuing Professional Development and Consequential Amendments Rules) Order of Council 2011

Made - - - - 2011
Laid before Parliament 2011
Laid before the Scottish Parliament 2011
Coming into force - - 2011

At the Council Chamber, Whitehall, the [ ] day of [ ] 2011

By the Lords of Her Majesty’s Most Honourable Privy Council

The General Pharmaceutical Council(4) has made the General Pharmaceutical Council (Continuing Professional Development and Consequential Amendments) Rules 2011, which are set out in the Schedule to this Order, in exercise of the powers conferred by articles 27(1), 37(3)(c)(iii), 43(7) and (8), 52(1) and (2)(b), 61(1) to (3) and 66(1) of the Pharmacy Order 2010(5).

In accordance with article 66(3) of that Order, the General Pharmaceutical Council has, in relation to rules under Parts 4 and 5 of that Order, consulted such persons and organisations as it considered appropriate including the organisations listed in paragraphs (a) to (h) of article 66(3) of that Order.

By virtue of article 66(4) of that Order, such rules cannot come into force until approved by order of the Privy Council.

Their Lordships, having taken these Rules into consideration, are pleased to and do approve them.

This Order may be cited as the General Pharmaceutical Council (Continuing Professional Development and Consequential Amendments Rules) Order of Council 2011 and comes into force on [date] 2011.

(4) The Council was established by article 4 of the Pharmacy Order 2010 (S.I.2010/231).
(5) See article 3(1) of the Order for the meaning of “prescribed”.
SCHEDULE
The General Pharmaceutical Council (Continuing Professional Development and Consequential Amendments) Rules 2011

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14. Consequential amendments of the Fitness to Practise Rules

The General Pharmaceutical Council makes these Rules in exercise of the powers conferred by articles 27(1), 37(3)(c)(iii), 43(7) and (8), 52(1) and (2)(b), 61(1) to (3) and 66(1) of the Pharmacy Order 2010(6).

In accordance with article 66(3) of that Order, the General Pharmaceutical Council has, in relation to rules under Parts 4 and 5 of that Order, consulted such persons and organisations as it considered appropriate including the organisations listed in paragraphs (a) to (h) of article 66(3) of that Order.

General

Citation and commencement
1. These Rules may be cited as the General Pharmaceutical Council (Continuing Professional Development and Consequential Amendments) Rules 2011 and come into force on [date] 2011.

(6) S.I. 2010/231.
Interpretation

2. In these Rules—

“the Order” means the Pharmacy Order 2010;

“Appeals Committee” means the Appeals Committee established under article 4(6) of the Order;

“CPD”—

(a) means the continuing professional development which registrants are required to undertake in order to have an entry in the Register renewed and to maintain competence; and

(b) includes any continuing professional development which a registrant is required to undertake by virtue of rules made under article 37(3)(c)(iii) of the Order;

“CPD framework” means the framework relating to the CPD of registrants which is adopted by the Council under article 43(4)(a) of the Order;

“CPD record”, in relation to a registrant, means a written record completed by the registrant that contains details about the CPD undertaken by the registrant since—

(a) the date of completion of the immediately preceding review by the Registrar of the registrant’s CPD; or

(b) if no review has taken place since the date on which an entry in the Register relating to the registrant was made or restored, the date of that entry;

“Fitness to Practise Committee” means the Fitness to Practise Committee established under article 4(6) of the Order;

“Fitness to Practise Rules” means the General Pharmaceutical Council (Fitness to Practise and Disqualification etc.) Rules 2010(7);

“notice of intention” has the meaning given in rule 8;

“supplementary notice” means a notice under rule 10(5)(b) (including a notice under that provision as it applies by virtue of rule 10(6)).

Service of documents

3.—(1) Subject to paragraph (2), any notice, demand or document required to be served by the Registrar must be in writing and must be served by sending it by a postal service or another delivery service (including, with the agreement of the person concerned, by electronic mail to an electronic mail address notified to the Registrar as an address for communications) or by leaving it at—

(a) in the case of a registrant, the registrant’s home address in the Register; or

(b) in the case of a person who is not a registrant, that person’s last known home address.

(2) If a person on whom any notice, demand or document is to be served by the Registrar so requests, such a notice, demand or document may be sent to or left at—

(a) where that person is represented by a solicitor, the solicitor’s practising or electronic mail address; or

(b) where that person is represented by a defence organisation or trade union, the business or electronic mail address for that defence organisation or trade union.

(3) Where a notice, demand or document is sent by post, unless sent by a postal service which records the date of delivery, it must be sent by first class post and is to be treated as having been served on the day after the day on which it was posted.

(4) Where a notice, demand or document has been sent by electronic mail or left at an address, it is to be treated as having been served on the day on which it was sent by electronic mail or left at that address.

(7) These Rules are Scheduled to S.I. 2010/1615.
Enforcing the requirements of the CPD framework

Failure to comply with the CPD framework

4.— (1) Each of paragraphs (2) to (9) sets out circumstances in which a registrant is to be regarded as having failed to comply with the requirements or conditions of the CPD framework.

(2) The Registrar is of the opinion that the registrant has failed without reasonable excuse to make an annual declaration regarding the registrant’s compliance with the requirements or conditions of the CPD framework.

(3) The Registrar is of the opinion that the registrant has failed without reasonable excuse—

(a) to comply with a request by the Registrar to submit a CPD record to the Registrar for review;

(b) to submit a CPD record to the Registrar by the date specified by the Registrar in accordance with the CPD framework; or

(c) to submit a CPD record to the Registrar which is in the form and manner specified in the CPD framework.

(4) The Registrar is of the opinion that the registrant has failed without reasonable excuse to record adequately in respect of any relevant period—

(a) the dates on which the registrant’s CPD has been undertaken; or

(b) any other information about the registrant’s CPD which is required by the CPD framework.

(5) The Registrar is of the opinion that the registrant has made an insufficient number of entries in respect of any relevant period in the registrant’s CPD record.

(6) The Registrar is of the opinion that the entries in respect of any relevant period in the registrant’s CPD record do not demonstrate that the CPD undertaken is relevant to—

(a) the safe and effective practice of pharmacy; or

(b) a learning need for the registrant that is relevant to the current scope of the practice of pharmacy including any specialisation of the registrant and the environment in which the registrant practises.

(7) The Registrar is of the opinion that the entries in respect of any relevant period in the registrant’s CPD record do not—

(a) include any CPD that relates to a specialisation of the registrant or the environment in which the registrant practises; or

(b) reflect any conditions as to the practice of pharmacy by the registrant which were in force for the whole or part of the relevant period and were imposed—

(i) by virtue of a direction given by the Fitness to Practise Committee under article 54(2)(e) of the Order; or

(ii) in the case of a visiting practitioner to whom Schedule 2 of the Order applies, by the competent authority in the practitioner’s home State.

(8) The Registrar is of the opinion that the entries in the registrant’s CPD record do not reflect any requirement which the Registrar imposes on the registrant—

(a) to undertake, by the date specified by the Registrar, any additional CPD after the restoration of the registrant’s entry to the Register by virtue of rules made under article 37(3)(c)(iii) of the Order; or

(b) to take, by the date specified by the Registrar, any remedial measure under rules 5(2)(a) and 6.

(9) The Registrar is of the opinion that, for any other reason, the registrant’s CPD record is inadequate or is not in a fit and proper state to be reviewed.

(10) For the purposes of paragraphs (4) to (7), references to “relevant period” are to any of the following that fall within the period covered by the CPD record of the registrant which is subject to review by the Registrar—

(a) the one year period that commences with the date on which the registrant’s entry in the Register was made or restored;

(b) each subsequent one year period that commences with the anniversary of that date; and

(c) any part of the period referred to in sub-paragraph (a) or (b).
(11) In the application of paragraphs (4) to (7) to a period falling within paragraph (10)(c), any number or other quantity which the CPD framework applies to a one year period is to be proportionately reduced.

Steps which the Registrar may take

5.—(1) Paragraph (2) applies where the Registrar is satisfied that a registrant—

(a) has failed to comply with the requirements or conditions of the CPD framework (including any failure to comply with requirements imposed in accordance with the provisions referred to in rule 4(8)); or

(b) has made a false declaration about compliance with the requirements or conditions of the CPD framework.

(2) The Registrar may decide to—

(a) impose on the registrant a requirement to take one or more remedial measures in connection with the registrant’s CPD;

(b) remove the entry of a registrant from Part 1, 2, 4 or 5 of the Register (as the case may be); or

(c) remove an annotation in respect of a specialisation made to any such entry.

(3) If the Registrar proposes to take any step referred to in paragraph (2)(a), the Registrar must follow the procedure set out in rule 6(2).

(4) If the Registrar proposes to take any step referred to in paragraph (2)(b) or (c), the Registrar must follow the procedure set out in rules 7 to 12.

(5) In relation to a person (“P”) who is a registrant only as a result of being entered in Part 4 or 5 of the Register, the Registrar may not take any of the steps referred to paragraph (2)(a), (b) or (c) unless the Registrar is satisfied that it is appropriate and proportionate to take that step in view of P’s continued lawful establishment in the P’s home State as a pharmacist or a pharmacy technician (as the case may be).

(6) Nothing in this rule prevents a registrant who has failed to take any remedial measure imposed in connection with the registrant’s CPD being required to take further remedial measures.

Remedial measures

6.—(1) The remedial measures that the Registrar may impose on a registrant in connection with the registrant’s CPD include (but are not limited to)—

(a) a requirement for the registrant to make entries in the registrant’s CPD record in the form and manner specified in the CPD framework;

(b) a requirement for the registrant to make entries in the registrant’s CPD record that accurately reflect the CPD activities already undertaken by the registrant;

(c) a requirement for the registrant to undertake additional CPD activities;

(d) a requirement for the registrant to undertake additional CPD activities which relate to the safe and effective practice of pharmacy;

(e) a requirement for the registrant to undertake additional CPD activities which relate to a learning need for the individual registrant that is relevant to—

(i) the current scope of the practice of pharmacy;

(ii) any specialisation of the individual registrant; or

(iii) the environment in which the registrant practises.

(2) If the Registrar decides to impose on the registrant a requirement to take one or more remedial measures, the Registrar must notify the registrant of—

(a) the measure or measures to be imposed;

(b) the reasons for it; and

(c) any date by which the registrant must comply with each measure.
Removing an entry or annotation in the Register

Proposal to remove an entry or annotation

7.—(1) Where the Registrar proposes to remove a registrant’s entry or annotation from the Register under rule 5(2)(b) or (c), the Registrar must consider whether to refer the matter to the Fitness to Practise Committee.

(2) If the Registrar has reasonable grounds for believing that the registrant’s fitness to practise is impaired, the Registrar may decide to refer the matter to the Fitness to Practise Committee in accordance with whichever of rule 6(5) or (7A) of the Fitness to Practise Rules(8) the Registrar considers to be appropriate in the circumstances of the registrant’s case.

(3) If the Registrar decides not to refer the matter to the Fitness to Practise Committee, the Registrar must serve on the registrant a notice under rule 8.

(4) Before making a decision under this rule, the Registrar may make such inquiries, including the instruction of external agents or investigators, and the commissioning of medical experts, as the Registrar considers necessary or expedient.

Notice of intention to remove an entry or annotation

8.—(1) “Notice of intention” means a notice that the Registrar proposes to remove from the Register an entry or annotation in respect of a registrant (as the case may be).

(2) A notice of intention must—

(a) set out the grounds for believing that the registrant—

(i) has failed to comply with the requirements or conditions of the CPD framework; or

(ii) has made a false declaration about compliance with the requirements or conditions of the CPD framework;

(b) be accompanied by copies of evidence (in a form that can be copied) on which the Registrar would seek to rely in any proceedings under these Rules to remove the relevant entry or annotation;

(c) invite the registrant to submit written representations, and any relevant evidence, to the Registrar as to why the entry or annotation should not be removed from the Register;

(d) inform the registrant that any such representations or evidence must be submitted no later than 28 days after service of the notice;

(e) inform the registrant that, if the registrant fails to submit written representations to the Registrar within that 28 day period, the relevant entry or annotation may be removed from the Register; and

(f) invite the registrant to indicate whether or not the registrant wishes the matter to be considered at a hearing.

No representations received within 28 day period

9. Where—

(a) the Registrar has served a notice of intention on a registrant; and

(b) has not received any representations from the registrant within the 28 day period referred to in that notice (see rule 8(2)(d)),

the Registrar may remove the registrant’s entry, or annotation in respect of a specialisation, from Part 1, 2, 4 or 5 of the Register (as the case may be).

Representations received within 28 day period

10.—(1) This rule applies where the Registrar receives representations from the registrant within the 28 day period referred to in the notice of intention (see rule 8(2)(d)).

(8) Rule 6(7A) of the General Pharmaceutical Council (Fitness to Practise and Disqualification etc.) Rules 2010 (S.I 2010/1615) is inserted by rule 14(3) of these Rules.
(2) The Registrar—
   (a) must consider the representations and any evidence received; and
   (b) may make such further inquiries (including obtaining legal advice) as the Registrar considers necessary or expedient.

(3) Where the Registrar determines that the registrant did not—
   (a) fail to comply with the requirements or conditions of the CPD framework; or
   (b) make a false declaration about compliance with the requirements or conditions of the CPD framework,
   the Registrar must close the matter and notify the registrant accordingly.

(4) Where paragraph (3) does not apply, the Registrar must proceed as follows.

(5) If, when making a determination, the Registrar proposes to rely on evidence that was obtained as a result of the Registrar’s further inquiries under paragraph (2)(b), the Registrar must send to the registrant—
   (a) copies of that evidence in a form that can be copied; and
   (b) if the registrant has not already requested a hearing, a notice (referred to in these Rules as a supplementary notice) which—
      (i) invites the registrant to submit written representations, and any relevant additional evidence, to the Registrar as to why the entry or annotation should not be removed from the Register;
      (ii) informs the registrant that any such representations or evidence must be submitted no later than 28 days after service of the supplementary notice; and
      (iii) invites the registrant to indicate whether or not the registrant wishes the matter to be considered at a hearing.

(6) Paragraphs (2) to (5) also have effect in relation to any further representations from the registrant which the Registrar receives within the 28 day period referred to in paragraph (5)(b)(ii).

(7) The Registrar must determine the matter under rule 11 in any case—
   (a) where paragraph (5) does not apply; or
   (b) if that paragraph does apply, once paragraphs (5) and (6) have been fully complied with.

The Registrar’s determination

11.—(1) Where the registrant does not request a hearing, the Registrar must determine the matter after the expiry of—
   (a) if the Registrar was required to serve one or more supplementary notices on the registrant, the 28 day period referred to in—
      (i) the supplementary notice; or
      (ii) if more than one supplementary notice was served, the most recent supplementary notice;
   in any other case, the 28 day period referred to in the notice of intention served on the registrant.

(2) Where the registrant has requested a hearing in response to the invitation in the notice of intention or a supplementary notice—
   (a) the Registrar must refer the matter to the Fitness to Practise Committee;
   (b) the Fitness to Practise Committee must hold a hearing in accordance with rule 33 of the Fitness to Practise Rules (procedure in relation to hearings of registration cases) for the purposes of making findings of fact in relation to the matter and advising the Registrar accordingly; and
   (c) once the Registrar has received the advice of the Fitness to Practise Committee, the Registrar must determine the matter.

(3) Where the Registrar determines that the registrant did not—
   (a) fail to comply with the requirements or conditions of the CPD framework; or
   (b) make a false declaration about compliance with the requirements or conditions of the CPD framework,
   the Registrar must close the matter and notify the registrant accordingly.
(4) Where the Registrar determines that the registrant did—
   (a) fail to comply with the requirements or conditions of the CPD framework; or
   (b) make a false declaration about compliance with the requirements or conditions of the CPD framework,
the Registrar may remove the registrant’s entry, or annotation in respect of a specialisation, from Part 1, 2, 4 or 5 of the Register (as the case may be).

Notification of removal of entry or annotation under rule 9 or 11

12.—(1) Paragraph (2) applies in any case where a registrant’s entry or annotation is removed from the Register under rule 9 or 11.

(2) The Registrar must send a written statement to the registrant’s last known home address giving notice of—
   (a) the removal of the entry or annotation;
   (b) the reasons for it; and
   (c) the registrant’s right of appeal to the Appeals Committee under article 40 of the Order.

Miscellaneous

Suspension from the Register pending appeal

13.—(1) Where—
   (a) the Registrar has decided to remove a registrant’s entry from Part 1, 2, 4 or 5 of the Register (as the case may be); and
   (b) a Notice of Appeal is served under the General Pharmaceutical Council (Appeals Committee) Rules 2010(9) in relation to that decision,
the Registrar may suspend the registrant’s entry in the relevant part of the Register pending the final outcome of the appeal.

(2) The provisions of article 56(2) to (10) of the Order are to have effect in relation to the Registrar’s decision to suspend an entry under paragraph (1) as if that decision were an interim suspension order made by the Fitness to Practise Committee under article 56(1)(a) of the Order.

(3) For the purposes of paragraph (1)(b), “Notice of Appeal” has the same meaning as in the General Pharmaceutical Council (Appeals Committee) Rules 2010.

Consequential amendments of the Fitness to Practise Rules

14.—(1) The Fitness to Practise Rules are amended as follows.

(2) In rule 2 (interpretation), in paragraph (1), after the definition of “the Committee” insert—
   “the Continuing Professional Development Rules” means the General Pharmaceutical Council (Continuing Professional Development and Consequential Amendments) Rules 2011;”.

(3) In rule 6 (which makes exceptions to the Registrar’s duty to refer matters to the Investigating Committee under article 52 of the Order), after paragraph (7) insert—
   “(7A) The Registrar may refer an allegation to the Committee instead of to the Investigating Committee where the Registrar has reasonable grounds for believing that a registrant has—
   (a) failed to comply with the requirements or conditions of the framework adopted by the Council under article 43(4)(a) of the Order relating to the continuing professional development of registrants; or
   (b) made a false declaration about compliance with the requirements or conditions of that framework,

(9) These Rules are Scheduled to S.I. 2010/1614.
and the Registrar considers that the Committee should consider the matter before the Registrar makes any determination under rule 11 of the Continuing Professional Development Rules 2011.”.

(4) In rule 33 (procedure in relation to hearings of registration cases by the Fitness to Practise Committee), in paragraph (1), after sub-paragraph (d) insert—

“(e) under rule 11(2) of the Continuing Professional Development Rules 2011 (which makes provision for hearings to be held in relation to certain continuing professional development matters).”.

Given under the official seal of the General Pharmaceutical Council this [ ] day of [ ] 2011.

Chair

Registrar

EXPLANATORY NOTE
(This note is not part of the Order)

This Order approves the General Pharmaceutical Council (Continuing Professional Development and Consequential Amendments) Rules 2011 (“the Rules”). The Rules were made by the General Pharmaceutical Council (“the Council”) under the Pharmacy Order 2010 (S.I. 2010/231) (“the Order”). The Rules set out various matters relating to non-compliance by registrants with the requirements or conditions of the continuing professional development framework adopted by the Council under article 43(4)(a) of the Order. The framework relates to standards of proficiency for the safe and effective practice of pharmacy that are set by the Council under article 43(1)(a) of the Order.

Rules 1 to 3 are general provisions. Rule 3 provides for the service of documents by the Registrar.

Rule 4 sets out the circumstances in which a registrant is to be regarded as having failed to comply with the requirements or conditions of the framework. The steps which the Registrar can take on being satisfied that a registrant has failed to comply, or has made a false declaration, are set out in rule 5. These are to require the registrant to take remedial measures or to remove an entry, or annotation, in respect of the registrant from the relevant part of the Register.

Rule 6 makes further provision about remedial measures imposed on a registrant. The Registrar is required to notify the registrant of their imposition, the reasons for it and the date for compliance.

Rules 7 to 12 set out the procedure where the Registrar proposes to remove a registrant’s entry or annotation from the Register. The Registrar must determine whether or not to refer the matter to the Council’s Fitness to Practise Committee (rule 7). If no referral is made, the Registrar must serve a notice informing the registrant of the proposal to remove the registrant’s entry or annotation from the Register (rule 8). The notice must provide information and evidence in support of the proposal, invite the registrant to respond and set out that registrant may elect for a hearing or for the case to be determined without a hearing. Where no representations are received within the 28 day period following service of the notice, the Registrar must determine the matter (rule 9). Where representations are received and the Registrar proposes to rely on any new evidence that has arisen, a supplementary notice (or notices) must be served (rule 10). Any hearing requested by the registrant is to be conducted by the Council’s Fitness to Practise Committee in order to determine the facts, but the Registrar must determine the matter irrespective of whether a hearing is held (rule 11). The registrant must be notified...
where a decision is made not to remove an entry or annotation (rule 10(3) or 11(3)) and must be notified of the removal of an entry or annotation (rule 12).

Rule 13 enables the Registrar to suspend the entry of a registrant from the Register pending an appeal by that registrant against the Registrar’s decision to remove the registrant’s entry from the Register. The rule provides that the procedure relating to the suspension of an entry set out in article 56 of the Order is to apply in respect of any decision by the Registrar to suspend a registrant’s entry in these circumstances.

Rule 14 makes amendments to the General Pharmaceutical Council (Fitness to Practise and Disqualification etc.) Rules 2010 (those Rules are scheduled to S.I. 2010/1615). The amendments result from provisions contained in these Rules.