Public business

Regulatory Transition Project Plan

Purpose
To inform Council of the completion of the transfer of regulatory responsibility from the Royal Pharmaceutical Society of Great Britain (RPSGB) to the General Pharmaceutical Council (GPhC).

Recommendations

The Council is asked to note:

i. The contents of this report.

1.0 Introduction

1.1 This report provides a summary of the completion of the transfer of regulatory responsibility from the RPSGB to the GPhC.

1.2 Day 1 operation of the GPhC was 27 September 2010.

2.0 Transition Project Workstreams

2.1 Rules and Statutory Instruments

The parliamentary process for the Rules was completed by 27 September 2010.

2.2 Governance

The Governance and Assurance Framework was agreed by Council although some elements e.g. the Communications Strategy, still remain to be agreed. A scheme of delegation is in place. The Vision and Strategy for the first two years has also been agreed, although it is proposed to undertake a review of this early in 2011.
A risk management process has been developed within the executive and is in use. The Audit and Risk Committee will review progress with the organisation’s risk management at its meeting in October.

2.3 Standards

Work has begun on scoping requirements for the implementation of standards for premises, in accordance with the standards development programme. Current GPhC standards have been communicated to registrants, and standards policy is on the Council’s agenda for this meeting.

2.4 Information Management and Technology

A considerable amount of time, planning and preparation was put in to ensure that the majority of staff were able to access Regulatory IT systems, electronic documentation and their accounts on Monday 27 September 2010. Telephone lines, email accounts and electronic documentation were transferred to the GPhC environment on the weekend of 25 and 26 September 2010, with the migration of Regulatory IT systems having taken place during the two weeks prior to 27 September 2010. The migration, on the whole, was largely successful.

As with a project on this scale there were some challenges that arose as part of the migration.

There were minor issues relating to access to some systems and PC set ups, but the majority of these were resolved either on Day 1 or in the next few days of operation.

The current telephone system struggled with the volume of calls the organisation received on and from Day 1. There was a high level of enquiries about the General Pharmaceutical Council and its operation in general, but with the posting of the 2011 renewal notices on Monday 27 September, call numbers increased significantly throughout the first week and remained high. This created problems in respect of call capacity, voicemail facilities and transfer of calls. Various strategies were implemented in an attempt to mitigate the impact on certain parts of the organisation. Moving forward and learning from this experience, an order has been placed for call centre technology to be brought into the organisation. This should allow better management of calls and greater flexibility to respond to peak business activity.

Some teams were unable to access their departmental mailboxes for a few days post the transition. This was due to a problem with the migration of these mailboxes from the RPSGB to GPhC environment, due to the size of the
accounts involved. This issue is now largely resolved and again, in order to learn from the experience, an IT housekeeping policy is currently being discussed and drafted to increase control and maintenance over mailboxes.

All emails from the GPhC now have a standardised, automated email footer which is controlled centrally. There was a slight delay in implementing this due to a quality control check of the data and a bug in the software which meant that there were some initial problems. These have now largely been resolved.

2.5 Registration

Concept, the registration database, and the live register search (available via the GPhC website) were available on Day 1.

Registrants and premises owners were sent their renewal notices which included their GPhC registration numbers on 27 September 2010 by first class post. The telephone and online (myGPhC) renewal systems were operational from 27 September and renewal declarations and payments were being processed from this date.

As at the date of writing 7082 (16%) of pharmacists and 1083 (12%) of pharmacy technicians have successfully completed their renewals for 2011. Pharmacy premises renewals have also been received in to the office.

Development work will now begin to accommodate the ‘rolling register’.

2.6 Fitness to Practise and Statutory Committees Secretariat

The majority of tasks have been completed including the recruitment of Committee Members, policy development and preparation of documentation. The tasks that need to be completed are:

- Training for Committee Members
- Recruitment of lay, registrant and reserve Committee Members
- Reviewing the requirements for medical assessors, clinical advisers and legal advisers. Identifying shortfalls in existing arrangements and reorganising contracts with new advisers to match the GPhC’s requirements.
- Arranging for committees to meet to approve new sanctions including indicative sanctions and standard case management instructions.
- Arranging for new inserts to be placed in the Statutory Committees Handbook as required.

We identified that three individuals who were formerly lay members of the RPSGB statutory committees were appointed to GPhC committees who were
not in fact eligible for appointment as GPhC lay committee members, in line with
the new eligibility definition in the Pharmacy Order and the rules made under it.
The individuals concerned have had a personal letter of explanation and
apology from the Chief Executive.

2.7 **Education and Quality Assurance**

The new CPD website went live on Day 1.

The Continuing Professional Development (CPD) team experienced a slight
delay in generating call lists for CPD review. This was as a result of not having
the correct view within Concept (the Registration database) to undertake this
task. This was not business critical and the problem has been resolved.

The CPD framework still requires approval at the October 2010 Council
meeting. The CPD Rules have been developed and are due to go out for
consultation shortly.

Pre-registration documentation required for Day 1 has been revised. Work
continues on documentation required post Day 1.

All accreditation documentation has been reviewed and amended and the
education standards have been incorporated in the accreditation manuals.

2.8 **Inspectorate**

The Inspectorate had the authorities and licences it required for Day 1. The
Inspectors procedures manual has been updated.

2.9 **Policy and Communications**

All key policies were agreed and ready for Day 1. The Standards and Advisory
Team staffed the GPhC helpline from Day 1 and this will continue for three
months.

The Fitness to Practise Diligence Report was sent to the Council for Healthcare
Regulatory Excellence, with copies to the Chief Pharmaceutical Officers. The
report has been published, and received wide coverage in the professional
press.

2.10 **Finance and Resources**

All finance activity has been completed with the exception of:

- The transfer of registrant direct debits from the RPSGB to GPhC. This is
due to take place on 14 October 2010.

- Service Level Agreements need to be agreed as soon as possible with the Royal Pharmaceutical Society. As with buildings and facilities (section 2.12 below), the relevant RPS managers have been fully and successfully engaged in enabling and supporting our launch; now that we are moving out of that phase we need to set target dates for completion of the outstanding commercial issues.

- Delegation of authority forms (confirming signing authorities) are scheduled to be completed by 13 October 2010

2.11 Human Resources

Transferring staff were issued with copies of their RPSGB employment contracts which specified the terms of their TUPE transfer from the RPSGB to the GPhC. An exercise is due to take place to identify any staff who have yet to sign and return their contracts as confirmation of the acceptance of the terms and conditions of their TUPE transfer. A letter has been sent to all transferring staff welcoming them to the GPhC.

The due diligence exercise which allowed the GPhC to understand the liabilities and responsibilities in respect of transferring staff was completed.

A consultation exercise on the GPhC Employee Handbook will commence shortly. A GPhC Employee Forum is also due to be established.

Sixty-four employees have requested that they become members of the NHS pension scheme and will be enrolled in time for the October payroll.

Arrangements have been made for presentations to be made and one to one independent financial advice to be given to those members transferring from the Society final salary scheme to the NHS scheme.

A new HR system is due to go-live later in the year.

Most staff have taken part in GPhC corporate induction.

2.12 Buildings and Facilities

A significant exercise took place to accommodate the GPhC on the 1st and 2nd floors of the building. Building works and over forty desk moves took place at a time of high level activity on the transition project.

Signage is now in place to distinguish the separate organisations which co-habit the building.

Negotiations on the lease of the building continue and await finalisation. As with finance and resources (section 2.10 above), the relevant RPS managers
have been fully and successfully engaged in enabling and supporting our launch; now that we are moving out of that phase we need to set target dates for completion of the outstanding commercial issues.

3.0 **Equality and diversity implications**

3.1 A GPhC equality and diversity scheme has been drafted and will require final approval by Council in November 2010.

4.0 **Communications implications**

4.1 The communications launch programme was completed.

5.0 **Resource implications**

5.1 Due to the un-precedented surge in applications from pharmacy technicians additional resources were recruited to assist the Registration Department during the 2011 renewals process.

Resources have also been reallocated to help with the high level of enquiries being received.

The patience, cooperation, hard work and goodwill of the staff both within the GPhC and the RPSGB shared services teams has been of the highest order and has been instrumental in ensuring a successful transition was achieved.

6.0 **Risk implications**

6.1 A risk register to cover the operational risks of the transition is reviewed on a regular basis by the Regulatory Transition Project Board. This is in addition to the regular critical review of the ongoing risk register by the executive team.

**Recommendations**

**The Council is asked to note:**

i. **The contents of this report.**

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*8 October 2010*