



GPhC response to the Professional Standards Authority for Health and Social Care, Draft Fee Regulations consultation

Question 1. Do you agree that the functions listed in Table 1 should be covered by the fee? Please provide the rationale behind your response and any amendments to the included functions you would suggest.

Yes, we agree. We assume that these regulations, once made, will be amended to reflect the additional powers of the PSA as proposed in the Law Commission's Regulation of Health and Social Care Professions Etc. Bill, should it be enacted in some version.

Question 2. Do you agree the functions listed in Table 2 should be excluded from the fee?

Yes, we agree and as above.

Question 3. Do you agree that method 1 – apportionment of the fee according to the number of registrants – is currently the only viable option available for determining the fees? Please explain the rationale for your response.

We do not agree that Method 1 is the only viable option for charging the fee. When this fee was first explored in 2011 we expressed the view that a fee based on registrant numbers could be over simplistic and did not take into account the widely differing costs per registrant of each regulator and their respective regulatory burdens.

At the time we expressed our preference for what was Option C which was based on a combination of registrant numbers and fee income received. Both numbers are transparently available as they

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are published by each regulator annually. We maintain that this will produce a more proportionate distribution of the fees burden between the regulators.

We did agree at the time that the basis of the fee should be clear to understand and not burdensome to administer. Your preferred option to apportion the fee according to the number of registrants does, however, meet with these criteria.

Question 4. Do you agree that the regulations should specify that the demand for payment should include a period of notice?

Question 4a: If so do you agree that this period should be 15 days?

Question 4b: If not, please specify a different period and explain why it is preferred.

Yes, we agree that the regulations should specify that the demand for payment should include a period of notice. To do anything else would not meet the previously mentioned criteria.

4a. We do not agree the notice period should be restricted to 15 days. We believe 15 days is unreasonably short, an administrative burden and would not fit easily with established payment processes.

4b. We believe a 30 day notice period would be more reasonable and practicable for the cycle of most payment systems. 30 days would also be in line with advice the government provides on gov.uk which states that 30 days is the default payment term.

Question 5. Do you agree that interest due on late payment should be set as drafted?

Subject to our comments above on the notice period, we agree that the interest due on late payment should be set as drafted.

Question 6. Do you agree with the Department's assessment that the implementation of this policy will not have an adverse impact on equality?

The draft regulations may have an adverse impact on equality due to the increased financial burden on regulators. This may cause an increase in fees which would impact on lower paid health professionals in different registrant groups as outlined in our response to question 3. Alternatively, additional efficiencies would need to be sought by regulators and this may reduce or reduce access to services for registrants and members of the public.

Question 7. Do you have any comments on the draft Regulations?

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Our comments in relation to the draft regulations are as follows:

- Regulation 2– the regulations do not specify what the “chargeable period” will be. In order for the regulations not to be a financial and administrative burden for regulators we would like the regulations to set out that the fees will be payable in line with the health regulators’ existing financial years and not solely on a period aligned to the Authority’s arrangements.
- Regulation 4 – 4(2) describes information that can be requested by the Privy Council and includes anticipated numbers of persons on the relevant register. We feel that requesting this information would be disproportionate as the calculation is based on the actual number of registrants as described in Regulation 5.
- Regulation 4 (and generally) – we assume that “persons” includes registered pharmacies.
- Regulation 6 – in 6(4) we draw attention to our answers to Questions 4a and 4b in the consultation. We maintain that 15 days would be an administrative burden.
- Regulation 7 – this regulation is not sufficiently specific and therefore grants the Privy Council a wide power to re-determine the amount of the fee. It does not make clear why the fees could be re-determined, nor relate it back to regulation 5, nor make clear when it is appropriate for a re-determination to be carried out. This could present a financial uncertainty for regulators and have a detrimental impact on their own fee setting. If the Regulations are to contain this power for the Privy Council then we would like to see a requirement for published guidance on the situations when redetermination may occur and the process that will be followed in making the re-determination.