

## PSNI Update

March 2008

### Latest News

#### New Director Trevor Patterson arrives at PSNI

The Pharmaceutical Society of Northern Ireland is delighted to welcome its new Director Trevor Patterson into post.

Trevor comes to the PSNI from a Chartered Professional body where he was the Director responsible for change management. He was also Deputy Chief Executive of TrustMark, the UK Government supported consumer protection scheme for repair, maintenance and improvement in the home. Trevor is a Ministerial appointee to a Northern Ireland Non Departmental Public Body where his skills and experience of corporate governance, in both the public and private sector and change management skills are key strengths.



*Trevor Patterson, new Director of the PSNI, is now in post*

Raymond Anderson, President of the Pharmaceutical Society of Northern Ireland commented: "Trevor comes to the Society with a wealth of experience, working within a regulatory framework, consumer protection environment and a membership organisation. The Council believes he has the competencies and skills to help move the Society forward and we look forward to working with him in the future".

Trevor Patterson commented: "I am delighted to be taking up my new post with the Society, today there are many challenges ahead both internal and external to this organisation. I hope the skills and experience which I bring will help develop the Society in the new and exciting times we face. I have a clear focus on patient and consumer protection and look forward to working with Council and the staff to help develop pharmacy and improve healthcare locally"

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#### Society Responds to Responsible Pharmacist consultation

The Health Act 2006 has replaced the 1968 Medicines Act requirement for a pharmacist to be "in personal control" of a pharmacy with a new requirement for each pharmacist premises to have a "responsible pharmacist".

It will be the responsible pharmacists statutory duty to ensure the pharmacy operates safely and effectively in the sale and supply of medicines

The Department of Health in England are now preparing for the formal introduction of the new requirements, currently scheduled for early 2009.

As part of the process of in-

roducing the legislation, at the end of 2007 the Department of Health consulted on what the appropriate regulatory framework for the Responsible Pharmacist requirements should be. The Pharmaceutical Society of Northern Ireland were invited to comment.

The main points the PSNI made to the Government in relation to the Responsible Pharmacist regulations where:

- A pharmacy should not provide prescription and pharmacy medicines to members of the public without a pharmacist present to offer advice and supervise sales
- The Society would oppose

the extension to Northern Ireland of regulations that may increase the risk of harm to members of the public as a result of any absence of pharmacists from the premises

The Medicines Act 1968 is a devolved matter in Northern Ireland. The Northern Ireland Assembly therefore has domain to implement the Responsible Pharmacist legislation in a separate fashion.

The Society's liaison with the DHSSPS (NI) and the Department of Health in England is progressing this matter

# The Future of the PSNI



Health Minister Michael McGimpsey is currently considering the future of Pharmacy Regulation in Northern Ireland.

## PSNI Meet with the Northern Ireland Health Minister

On Tuesday 12 February the President of the Pharmaceutical Society of Northern Ireland, Mr Raymond Anderson, led a delegation of the Society to meet the Health Minister Mr Michael McGimpsey MLA.

The meeting lasted over half an hour and the discussion was a frank yet friendly exchange of views on the future of Pharmacy registration, regulation and representation in Northern Ireland.

The Society delegation made a presentation to the Minister on how they saw the future for Pharmacy and outlined the Council's concept of how Northern Ireland Pharmacy

could meet the needs of both the White Paper and Devolution.

Commenting on the meeting the President said "We see the Society continuing to make a significant contribution to Pharmacy in Northern Ireland and clearly the Minister believes we have a major role to play in the future."

"Mr McGimpsey was very interested in our views and has reiterated that he hasn't yet made a decision on the way forward. He has however committed himself to further discussions with the Society about the future. We pointed out the developing situation in Scotland and drew parallels between the

need for a local voice in each of the devolved regions."

"We believe the current system within Northern Ireland can be adapted to meet the needs of the White paper and the Society welcomes the opportunity to be involved in this process. Clearly with our own devolved Government we are delighted to be able to discuss these issues with the Minister and all members of the health committee."

The delegation was made up of the President, Raymond Anderson, Kate McClelland (Past President), Trevor Patterson (Director) and Mark Neale (Head of Public Affairs).

## A 21st century framework for pharmacy regulation in Northern Ireland

On the first anniversary of the Government's ground-breaking White Paper on the future of professional regulation in the health sector, the PSNI have tabled their vision of the future of pharmacy regulation in Northern Ireland.

Key features of the new model include:

- Replacing the current PSNI governing Council, of 22 professional members, with an independently appointed council made up of lay and professional members .
- The creation of two forums to inform the work of Council and the Society. A consumers/patients forum would consider the impact of regulation and other initiatives from a patient perspective while the Professional forum would inform Council and the Society of the impact of regulation and standards from a professional perspective and provide professional

leadership.

- Continued registration of pharmacists and pharmacy premises within Northern Ireland. The PSNI also wish to register Northern Ireland's Pharmacy technicians.
- A wholly independent adjudication panel for Fitness to Practise cases. This panel would have a wider range of sanctions available to it.
- Continuance of the departmental Inspectorate, as praised by Dame Janet Smith.

Fundamentally, the new model would create the ability to regulate and support pharmacy in Northern Ireland according to the specific needs and policy priorities of the new devolved administration. Unlike Scotland and Wales, all aspects of health are devolved in Northern Ire-

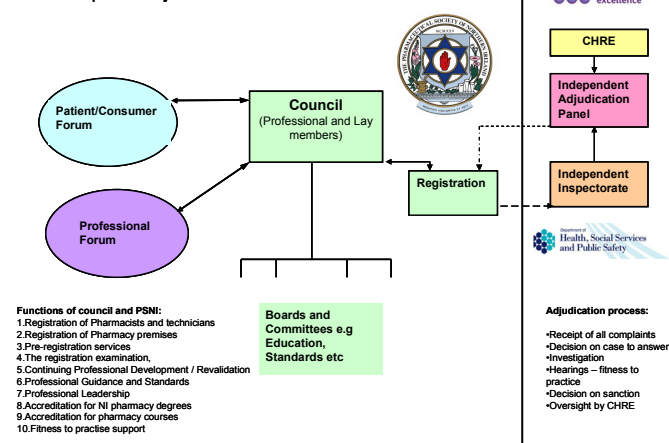
land.

There is another important potential advantage of the PSNI's proposed model that could benefit the regulation of all health professionals. Placing the adjudication panel outside of the Society's structure provides an excellent template for creating an Office of the Health Professions Adjudicator (OHPA) based in Northern Ireland in the future. Under the terms of the Health and Social Care Bill, currently progressing through the House of Lords, Doctors and Optometrists called be-

fore an adjudication panel on matters of professional competence will have their case heard by a new OHPA .

Other health regulators are expected to move their adjudication functions into this body in future. As the OHPA develops recognising the unique regulatory structures in Northern Ireland, there is strong argument for a distinct OHPA in Northern Ireland cognisant of the priorities and issues of the devolved administration.

### Proposed Structure of PSNI and relationship with Adjudication Process



## Why Devolution really makes a difference

Given the topsy-turvy coverage of proceedings at Stormont, one could be forgiven for missing the significance of the new powers that have been accorded to decision-makers in the Stormont Assembly.

However for organisations such as the PSNI, that assess and manage the impact of legislation and government initiatives on a daily basis, it is difficult not to be acutely aware of the regulatory significance a restored Assembly Executive has in policy areas such as Pharmacy.

Indeed, uniquely to any of the other devolved administration (Scotland, Wales, London) as a consequence of its pre-history of devolved authority before 1972, Northern Ireland has retained control of a range of important areas in health,

such as the Medicines Act 1968.

Overall the PSNI see these powers as a source of great opportunity for patients and the public in Northern Ireland. The fundamental principle of devolution is to allow local solutions to be implemented to tackle local problems.

In the PSNI's response to the Assembly's Draft Programme for Government, the Society identified a range of health needs for Northern Ireland that could be better addressed through pharmacy, using the powers available to the Assembly Government, and in conjunction with the presence of a bespoke Northern Ireland pharmacy regulator.

It seems an entirely perverse outcome to the Society that less than one year after the

return of devolved authority over healthcare in Northern Ireland, an important implementation tool such as the PSNI, should be conceded within a much larger UK-wide body.

The Society's full proposals are available on the website [www.psn.org.uk](http://www.psn.org.uk)



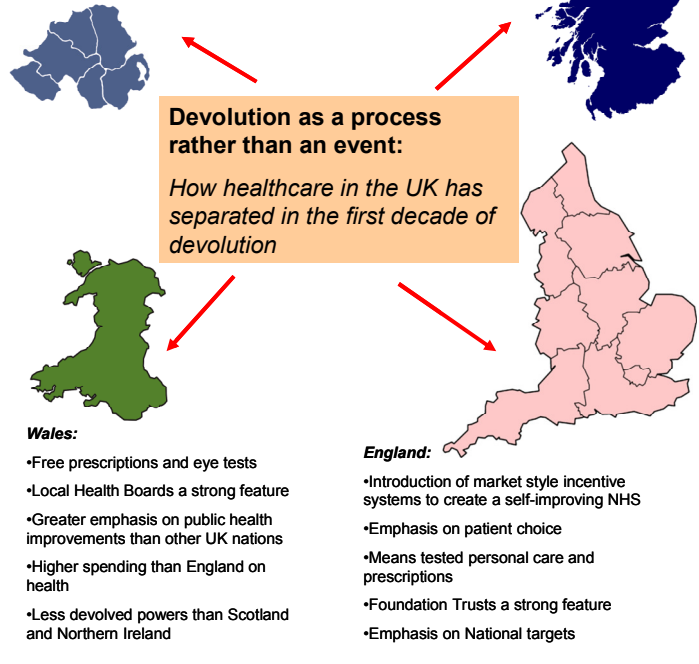
*Regulation of health professions is a devolved matter in Northern Ireland*

**Northern Ireland:**

- Undergoing organisational rationalisation
- Fully integrated health and social care
- Independent pharmacy inspectorate and regulator
- Particular challenges in relation to mental health care
- Some stalling in policy development due to political uncertainty pre-2007

**Scotland:**

- 1990s "quasi-market" abolished
- Trusts merged into single health systems
- Community Health Partnerships a strong feature
- Has not created a PCT equivalent
- Free personal care for the elderly
- Ground-breaking E-pharmacy programme



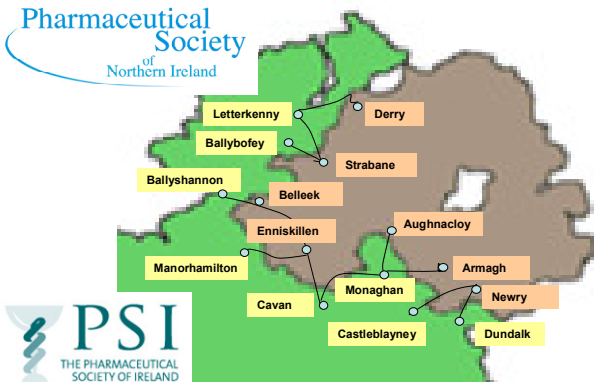
**Wales:**

- Free prescriptions and eye tests
- Local Health Boards a strong feature
- Greater emphasis on public health improvements than other UK nations
- Higher spending than England on health
- Less devolved powers than Scotland and Northern Ireland

**England:**

- Introduction of market style incentive systems to create a self-improving NHS
- Emphasis on patient choice
- Means tested personal care and prescriptions
- Foundation Trusts a strong feature
- Emphasis on National targets

*Cross-border communities & their connections*



## Pharmacy in Northern Ireland as different: our EU land border

Northern Ireland's case for its own pharmacy regulator is further highlighted by the simple fact that it is the only UK region with an EU land border.

Without clear and agreed regimes for the movement of pharmacists, patients and medicines cross border Northern Ireland could be more exposed than any other part of the UK to the issues surrounding counterfeit medicines, issues of inter country pharmacist

registration and issues surrounding the supply of medicines to patients.

However, the PSNI as the Northern Ireland pharmacy regulator has an established 80 year record of experience in managing the risks from proximity to an international land border. The PSNI are concerned that this body of experience could be lost if a hasty move was made to create a UK-wide regulator without an adequate presence in Northern Ireland.

However, in a new devolved context, the Society also views the proximity of the Republic of Ireland as a source of opportunity for patients, the public and Northern Ireland's healthcare system. For example, the Pharmaceutical Society of Northern Ireland recently signed an Agreement of Understanding with the Pharmaceutical Society of Ireland (PSI) which commits both sides to working together to improve patient care and professional development across

the island.

The relationship is likely to grow in relevance as cross-border co-operation in service provision develops under the auspices of initiatives such as Cooperation and Working Together (CAWT). Health services in both countries recognise the efficiencies and improvements in access to services that can arise as a result of appropriate co-operation.

Once again, independent arrangements for the regulation and representation of pharmacy in Northern Ireland are analogous to the Stormont Executive being able to innovate in health policy.

## Education

### A word from our Post Registration Facilitator



Post Registration Facilitator  
Deirdre McAree

**"I hope  
Individual  
feedback from  
assessors will be  
invaluable"**

Since becoming post-registration facilitator in January, I have been busy dealing with a range of educational issues. As part of my role I am responsible for managing the Continuing Professional Development of all registered pharmacists.

During February I met with the majority of the assessors, ascertaining their views and identifying opportunities to improve the CPD process

Results and feedback have been issued to all those who were in period 2 of the 2006/7 cohort, and assessment of period 3 portfolios is currently underway.

Once the assessments have been completed, pharmacists will receive letters outlining the option their portfolio has been allocated. This will be accompanied by a feedback report explaining each option and detailing

how each pharmacist has performed against the assessment criteria. A statistics table will also be provided showing overall performance.

Within the feedback, a pharmacist can expect to see some statements which assessors have included to assist them for future cycles.

"I hope individual feedback from assessors will be invaluable. This feedback will give clear guidance on meeting the essential criteria for future portfolio entries."

I have been meeting pharmacists on a one-to-one basis to talk through issues and concerns they have had with their portfolios. I hope that by providing individual feedback to pharmacists who request this is both beneficial and supportive.

I aim to build great relationships with the membership.

As part of my strategy, I encourage pharmacists to contact me either by telephone or by e-mail, and of course appointments can be made to meet me if that is required. In addition I will be tutoring two NICPPET workshops in April to assist pharmacists wishing to record CPD online.

Deirdre can be contacted by email—

Deirdre.mcaree@psni.org.uk

Or by telephone at the Society  
028 90326927

### Return to Practise—how can you help?



**If you are interested in helping please contact:**

**Brendan Kerr**

Telephone

**02890326927/8**

Email

**[brendan.kerr@psni.org.uk](mailto:brendan.kerr@psni.org.uk)**

The Pharmaceutical Society of Northern Ireland is witnessing an increasing number of pharmacists who are returning to work after taking some time out of practise. The Society is seeking the cooperation of pharmacists and employers in offering either work shadowing or placements prior to a pharmacist then operating as a sole practitioner.

The reasons for absence will have been varied e.g. child care, career break, retirement or possibly illness whether physical or mental. The pharmacist may have retained their registration with the Society or not but what will be missing was the opportunity to put their skills and knowledge into practise.

Alternatively the pharmacist may be registering after returning from practising outside the UK.

The diversity of the pharmacy workforce will also see many practitioners crossing between primary or secondary care, administrative or academic environments. The recent DHSSPSNI training initiative on workforce planning to address events like a national emergency e.g. pandemic flu, is an example of how pharmacists' can contribute to meet possible new practice needs. A pharmacist will cost £100K to train as a practitioner and this is a preventable loss to the health-care system.

There is the case of the practi-

tioner who has been ill and may need a stepwise return to practise, to gain full confidence and functionality. This will only happen if we secure the support of the pharmacy profession. The Society is therefore seeking possible placement positions for such persons to foster and mentor return to practise for these practitioners. The society will be working with NICPPET to develop "Return to Practise" training support

If you are interested in helping in return to practise training please register an interest with the Society's Registrar.