

# MINUTES

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A Meeting of The Pharmaceutical Society of Northern Ireland was held at 7 pm on Thursday 27<sup>th</sup> January 2011, in the Society House, 73 University Street, Belfast. BT7 1HL

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## **Present**

Ms A Bowen (President)  
Mr M Nelson (Vice-President)  
Mr P Kelly (Hon. Treasurer)  
Mrs M Singleton  
Mr R Anderson  
Mrs R Tasker  
Mr D Byrne (arrived at)  
Dr L Byers  
Prof J McElroy  
Mr J Hamill  
Prof P McCarron

## **Apologies**

Prof G Linden  
Dr G Fleming  
Prof D Woolfson

## **In Attendance**

Mr T Patterson (Chief Executive)  
Mr B Kerr (Registrar)  
Mr M Neale (Head of Public Affairs)  
Mrs J Greenfield (Professional Forum Manager)  
Mr Richard Price (Policy Officer)  
Ms C English (Clerical Officer)

## **Public Attending**

None

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### **1. Introduction and Welcome, Apologies.**

The President welcomed everyone to the meeting. Apologies were accepted.

### **2. Minutes of the Previous Meeting of 18<sup>th</sup> November 2010**

- Matters of Accuracy  
There was a general comment on page 9 under Financial Plan which was to be removed.
- Adoption of Minutes  
The minutes were proposed by Prof McCarron and seconded by Mrs Tasker

- Matters Arising

It was agreed that the Action Points from the previous meeting will be discussed under the appropriate agenda points

### **3. Tabling of Any Other Business**

The President indicated that she had a matter to discuss at the end of the meeting.

### **4. Correspondence**

#### Letter to DHSSPS Minister of Health from CEO

The CE had written to Mr McGimpsey to acknowledge that the selection of the Chair to the Statutory Committee by the DHSSPS would now be addressed in the new raft of legislation being considered for pharmacy by the Department

#### Pre-reg Pharmacist Placements Letter from DHSSPS

It was explained that this letter was a request to community pharmacists for guidance surrounding the issue of funding to meet the demands and expectations of Pre-reg placements in 2012. There was a detailed discussion concerning the context of the letter, with particular attention to the dialogue between the PCC and the Department on this issue.

There had been an earlier suggestion from the CPO that PSNI set strengthened standards on what a Pre-reg placement must offer the student.

A discussion then followed on the linkage between pre registration funding and the proposed 5 year integrated degree, currently being considered in England and some concerns were raised about implications for the provision

of pre registration training in Northern Ireland in the future if this was also to include a 5 year degree. It was noted that the 5 year degree programme being proposed may include two placements of 6 months. It was pointed out that a different model in Scotland might also cause the increased traffic of students to Northern Ireland.

Council were advised that it could prove counterproductive if the PSNI were to pre-empt discussion about Pre-registration trainee placements, as circumstances could change in the coming months. It was noted that a 'stand off' between employers and the funding body will also have ramifications as this will add difficulties to the registration process if it resulted in late entries.

It was highlighted that the rise in number of pre-reg students could have implications for quality in terms of the potential for businesses taking on pre-reg students due to the financial benefit but lacking the capacity to provide acceptable training.

It was noted for the record that whilst historical feedback from pre-registration trainees has been generally good, issues have been raised concerning who has the governance responsibility for pre-registration training. It was also stressed that gathering evidence is vital in proving that the system is working well.

**Key Decision: It was agreed that Council would note the contents of the letter but that no further action was necessary at this stage.**

Letter from the Department of Health regarding EC consultation on 'Single market'

It was agreed that this letter would be discussed in connection with the Registrar's report.

**5. Staff Reports**

**i. Chief Executive's Report**

Attention was drawn to details of the legislation consultation in the pack. Most of the Society's requested changes were agreed by the Department but there was currently no mechanism for repeal for the byelaws. The implications of this could mean a 20 member subgroup could influence Council, ergo the independent status of Council could potentially be compromised. There are two possible courses of action:

1. Either take the byelaw provisions out of the current legislation
- or
2. Call an SGM to remove the remaining byelaws. It was suggested that a Motion could be passed by Council and approved at an SGM altering the status of the byelaws so that they in future only applied to the Professional Forum

The CE drew attention to Section 3 of his report, with particular attention to detail about the GPhC and the somewhat confusing nature of the content.

There was a request for clarification about the status of the Chairs and Deputy Chairs of the Statutory Committee being lay members, which led to a discussion about recruiting a legally qualified chair, and the subsequent cost implications.

Attention was drawn to the consultation list, with reference to the omission of some relevant bodies. Staff were asked to signal the consultation to other interested bodies at the appropriate time.

The CE advised that he is in receipt of a restricted copy of a draft Command Paper due to be published in the near future by the Coalition Government. It was reported that the position of the new Government is that, as a cost-imperative, regulation should be a last resort, after all other options have been exhausted. He went on to explain that regulation fees are an issue and the Coalition Government would express resistance to any increases.

The CE advised that the smaller regulators are apprehensive about the implications of the Paper. However there is an opportunity for smaller regulators to develop greater cohesion and demonstrate efficiency.

There was a discussion about how the Department of Health would present any feedback given to them from the PSNI. It was eluded that this could potentially achieve little but that having been invited feedback should be given. Another option of raising concerns was mentioned in the form of addressing the Health and Social Care Bill currently before Parliament by briefing parties, MPs and Assembly Members (in relation to Legislative Consent).

#### CHRE Symposium

The CE and President attended this event and reported that the issue of information sharing was the main focus of the agenda, with specific attention on greater collaboration. Other matters related to the Government's Command Paper were prevalent.

Mr. Anderson suggested previous initiatives to share knowledge and best practice between Regulatory Body Council Members should be revived. The CE undertook to take the matter to the Chief Executive's Steering Group.

#### GPhC Memorandum of Understanding

The CE advised that the meeting with GPhC was extremely encouraging; they expressed a keen willingness to cooperate in future working. A Memorandum of Understanding is now to be drawn up and the outline agreed. However, the CE advised that the tone of the meeting was collaborative and he felt that the GPhC were concerned primarily with building a sensible arrangement, open to scrutiny. He advised that the GPhC are in agreement with emerging CPD and revalidation models, specifically in relation to specified content, appraisals, peer reviews and patient feedback, and are keen to share research and build consistency where suitable.

<b>Action point: CE to further develop heads of Memorandum of Understanding and bring to a future Council meeting for agreement</b>
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#### Future Meetings

The CE advised that future Council dates had previously been circulated, the table had to be changed to accommodate Finance and House meeting date changes only. The next proposed Council meeting dates are as follows:

- 24<sup>th</sup> February 2011
- 7<sup>th</sup> April 2011
- 19<sup>th</sup> May 2011
- 30<sup>th</sup> June 2011

**Council agreed to the dates**

## CPD Development

Council were advised that the CPD process needs further development, namely ensuring that first class quality assurance is put in place particularly around consistency, in order to ensure that the revalidation platform is both evidence based and quality assured.

There was a discussion regarding double marking and identifying marking trends of certain assessors, e.g. those who may mark more harshly than others.

This years CPD results were discussed with emphasis on the 21% of Option 4 results in period 2. Council were advised that whilst this was a high number the rest of the statistics revealed generally good results. It was advised that it was current practice to include other portfolios in with the Option 4 verifications to ensure that assessors aren't assuming that they are automatically Option 4. This led to a discussion about whether the number of Options is too high and whether a pass or fail system with feedback would be a more effective process.

It was mentioned that the Public Forum had not yet been included in the discussions about CPD from a public safety perspective, it was noted that this would have the encouragement of CHRE.

There was a discussion regarding CPD cycles and sampling capacity for revalidation. It was agreed that it was difficult to produce a work plan until rigor is established. It was queried whether revalidation could be a yes or no system. The process was discussed with particular attention on identifying risk.

A concern was raised regarding the individual's choice of CPD subject matter, and the potential for diluting the purpose of the process by allowing irrelevant

or non patient focused topics. It was noted that the CPD process is different to the revalidation process as it is the responsibility of the Pharmacist to identify relevant issues.

Council were then asked to make a decision about the options for CPD development as presented in advance of the meeting.

**Motion to Council: That Option 3 of the CPD Options paper is to be endorsed and actioned.**

Council agreed that Option 3 be accepted and asked that the situation be reviewed after one year.

Council were informed that Ms Joanne Crawford MPSNI will be the temporary cover for the Pre-reg Facilitator for around 3 months on a secondment from Boots the Chemists.

#### **ii. Head of Public Affairs Report**

Council were made aware of media enquiries relating to public health issues such as swine flu and legal highs. The Society was asked to contribute to a recent radio programme involving a GP voicing concerns about pharmacists supplying prescription only medicines before prescriptions were issued. It was noted that a forthcoming Statutory Committee would be considering a similar situation.

Council were advised that there was a good attendance for the Fellowship Dinner and that it was a successful event.

The Head of Public Affairs discussed a recent meeting with the other Regulatory Bodies dealing with the issues of equality and diversity, particularly in relation to the Equality Act 2010. It was noted the new GB legislation does not cover Northern Ireland however he emphasised that it will

be useful in the future to observe how other regulators deal with the new requirements.

**Action Point: Council were advised that drawing up an equality scheme and action plan will be necessary to ensure that we are meeting our legal obligations. Mark Neale to lead.**

Council were given a report on the Society's attendance at the various political conferences, noting that the Sinn Féin conference had yet to take place. The Head of Public Affairs advised that he and the Registrar will be representing the Society at the NCAS conference in London on Thursday 2<sup>nd</sup> February.

### **Professional Forum**

Professional Forum Manager Julie Greenfield provided an update to Council on the Forum.

Council were informed of the successful outcome of the Professional Forum Board election. There were some unfortunate issues with the electronic voting mechanism, managed by our website provider. Due to the lack of adjustment for BST and staff having to leave early during the bad weather. This was rectified by opening the voting system for a further 24 hours in January.

In total 353 pharmacists voted, 17.5% of pharmacists on the register. 87% of those who voted used the online facility.

The future plans for the Professional Forum were discussed with emphasis on building a strong model with Council in identifying each others defined roles. Attention was drawn to the importance of defining a critical pathway and putting milestones in place to ensure the facilitation of this effective arms

length body. Qualities such as good communication, visible leadership and mentorship were stressed as vital to the process, as well as giving members a comprehensive overview of all aspects of the organisation.

The first meeting of the Professional Forum Board will be in mid March.

### **iii. Registrar's Report**

Council were advised that two Statutory Committee cases were due to take place this week, the outcomes would then be determined.

The Scrutiny Committee met on 16<sup>th</sup> December 2010 to discuss three cases, two of which were then closed and one adjourned. A second meeting took place on 13<sup>th</sup> January 2011 to review an additional case, this case was subsequently closed.

Council were advised that the number of Scrutiny Meetings will increase when new legislative powers are granted to the Society therefore costs of the Scrutiny Committee are likely to increase.

Council were advised of the Fitness to Practise report published on the website with the learning outcomes associated. Professor McElnay suggested learning points be drawn from cases in an anonymised fashion.

Council were informed of current issues relating to mobility of registration of professionals within the EU with particular attention to how temporary and occasional workers move between states. An example of the poor uptake on temporary registration was given by the registrar particularity referencing Scandinavian nations and cross border movement of their health care professionals. It was noted that the European Commission's position was that current systems employed by competent authorities appear to inhibit temporary movement. There are other problems in sharing information, for

example in the case of Hungary where government legislation is interpreted as not permitting the release of personal information. In many cases the proactive approach to publishing Fitness to Practise decisions that the UK competent authorities have adopted are not being reciprocated by other states in Europe.

The further development of the IMI system has been suggested by the European Commission to integrate a capacity to manage a passport or information key for registrants wishing to move to other states Council should now expect an EC Green Paper on the 'single market' in late autumn and an EC White Paper by the end of the year. A draft response from the Society to a current Commission consultation will be forwarded to Council by the Registrar before any submission.

**Action point: Registrar to develop a response on the European Commission's Public Consultation on the Recognition of Professional Qualifications Directive.**

Raymond Anderson informed Council that this issue will also be addressed by the Pharmaceutical Group of the European Union at its next meeting.

There was a short discussion about dispensing Schedules 4 & 5 Controlled Drugs on EEA prescriptions.

The impact of any change to supervision requirements as listed in the Medicines Act and the likely impact on the registration of technicians was briefly discussed. More information is expected on supervision changes in the first week of February after a teleconference with the four Departments of Health, the pharmacy regulators and professional bodies.

21.15 – Break - Mark Neale and Julie Greenfield left meeting.

Meeting resumed at 21.25

## **6. Report from Committee Meetings**

### **i. Education Committee minutes from meeting of 9<sup>th</sup> December 2010**

Council were updated on GPhC consultations and advised that responses are required before 7<sup>th</sup> February 2011. Some initial thoughts arising from the proposals in the consultations include:

- A memorandum of understanding between PSNI and GPhC should be drafted and agreed including matters around OSPAP assessment and reciprocal recognition of CPD
- A new accreditation methodology incorporating a full visit every 6 years as opposed to every 5 years could be agreed.
- Any new set of Education Standards should consider including graduate learning outcomes on the impact of devolved systems of healthcare on the practice of pharmacy

#### Online CPD Manual Update

Council were advised that after some initial concerns regarding potential viruses, the online CPD system has gone live. There have been some glitches that are expected to be resolved shortly.

#### Risk Register

Council were advised that the Education elements of the Risk Register would be discussed more fully at the next meeting.

Council were updated on a visit to the Pharmaceutical Society of Ireland's development centre to discuss CPD.

## Revalidation

The University of Manchester have completed a risk assessment questionnaire which will become available shortly

## References for the Pre-registration Training Examination.

Council were advised of the rationale behind providing trainees with clean copies of the Code of Ethics during the pre-registration exam

**Key Decision: It was agreed that clean copies of the Code of Ethics (available from existing stocks) would be handed out at the beginning and collected after the exam.**

## ii. Finance and House minutes from meeting of 17<sup>th</sup> January 2011

### *Budget*

Council were made aware that the largest expense recently was the Fellowship Dinner, costing approximately £5000, for which sponsorship was gratefully received.

### *Recruitment*

Council were made aware of the present staffing arrangements for the organisation which included four Pharmacists (one full time and three part time).

In line with the goals of separating functions Council were advised that rearranging duties will be inevitable. It proposed that in order to better achieve this goal and create a more cohesive team, two full time staff members are needed and that the opportunity currently exists to move to this structure.

Current difficulties were discussed with emphasis on the lack of pharmacy support in Standards development and Fitness to Practice, especially in the context of revalidation and the future development of statutory powers.

Council were advised that the recent change in CPD sampling has resulted in a saving in administration time as have changes to Council and Committee meeting frequency.

The President requested some staff members to leave the hall to allow private discussion, as Council wished to discuss staffing issues.

**9:45pm Brendan Kerr, Chrisanne English and Richard Price left the meeting returning at 10.10pm.**

There was a discussion about the importance of balancing the goals of public safety and public awareness, in the context of separating the functions of regulation and professional support services. Concerns were expressed about how this will work in practice; emphasis was placed on the issue of shared resources where no regulatory conflict existed.

Council requested a greater explanation of the structure of the proposal. In response it was stressed that the regulatory functions at present are stretched to capacity and explained that the suggested proposal will be flexible and must be tested in practice and necessary changes made along the way. Further regulatory pressures will emerge with the new legislation and the proposal would provide an element of future proofing.

Council were made aware of costings and potential savings if only essential expenditure was covered as set out in the documents. It was stressed that the proposal reflects a reduction in proposed costs and increase in capacity

and that the reduction in costs of CPD could facilitate funding elsewhere. Other funding options were discussed for the development of professional leadership such as the use of PASS and potential funding from research.

A query was raised about the likelihood of a greater proportion of the pharmacy premises fees being released by the DHSSPS. It was advised that this is a minimum of 50% and is estimated at around £40,000. It was noted that the cost of premises registration currently exceeds the monies recovered from the Department.

**Motion to Council that the Budget and the planned Recruitment process are accepted by Council**

– Prof McElnay proposed and Mr Nelson seconded.

**iii. Legislation, Standards and Practice Committee minutes from 1<sup>st</sup> December 2010**

The President proposed a minute of silence to acknowledge the recent death of Ms Andrée McCollum.

**Action point: It was suggested that a letter be sent to the family of Andrée McCollum from the Council. This was agreed.**

The minutes of the previous meeting were discussed with emphasis on a request by the Heads of Pharmacy at the 5 Hospital Trusts for their Clinical Pharmacy Standards to be endorsed by the Society. Several options were discussed:

- No endorsement by PSNI
- Utilise external specialists for validation

- Take request to the Professional Forum in future

It was agreed that this should be discussed further at the next meeting of the Legislation, Standards and Practice Committee. It was also suggested that the UK Clinical Pharmacists Association maybe be able to offer guidance.

The Policy Advisor reminded Council that there are potentially wider implications of endorsing the Group 5's set of standards. E.g. other organisations may make similar requests.

#### **8. Recent and Coming Events**

None.

#### **9. Membership of Committees**

Council were made aware that those who have not replied can assume that they will stay on the same Committee as last year unless otherwise indicated.

#### **10. Any Other Business**

See note below

11. Date of Next Meeting – February 24th 2011

### **CONFIDENTIAL**

**The Chief Executive, Registrar, Policy Advisor and Clerical Officer left the meeting at 10.35pm in order that a confidential staff related matter could be discussed.**