



## **Annual Report and Accounts 2020-21**

**For the year ended 31 May 2021**

# **Pharmaceutical Society of Northern Ireland**

Annual Report and Accounts 2020-21

For the year ended 31 May 2021

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Any enquiries about this publication should be sent to us at the Pharmaceutical Society NI, 73 University Street, Belfast BT7 1HL.

Email: [info@psni.org.uk](mailto:info@psni.org.uk)

Telephone: **028 9032 6827**

This publication is available from our website at [www.psni.org.uk](http://www.psni.org.uk)

# Contents

<b>1. President and Chief Executive - Joint Foreword .....</b>	<b>3</b>
<b>2. Who we are.....</b>	<b>5</b>
<b>3. What we do.....</b>	<b>5</b>
<b>4. About our Register .....</b>	<b>7</b>
<b>5. Activity and Performance in 2020/21 .....</b>	<b>8</b>
<b>6. Pharmacy Forum NI .....</b>	<b>37</b>
<b>7. Financial Overview .....</b>	<b>51</b>
<b>Chair of Resources Committee Foreword .....</b>	<b>53</b>
<b>Council, Executive, and Professional Advisors .....</b>	<b>57</b>
<b>Statement of Responsibilities of the Council .....</b>	<b>58</b>
<b>Independent Auditors Report.....</b>	<b>59</b>
<b>Financial Statements.....</b>	<b>62</b>

# 1. President and Chief Executive - Joint Foreword

In 2020/21, the Covid-19 pandemic has continued to place extreme pressures on the health and care sector and has continued to impact upon every aspect of society. During the second wave of the pandemic, pharmacists again rose to the challenges that Northern Ireland faced and have provided safe and effective services in a fast moving and evolving set of circumstances. Pharmacists have also played a leading role in the roll out of the Covid-19 vaccine programme, which has been transformative in the fight against Covid-19, and we are all grateful to the dedication and professionalism of those involved.

We once again acknowledge and congratulate the profession, in all its many settings, for its resilience and continued ability to adapt to unique and challenging circumstances.

During 2020/21, we have continued to prioritise our ability to be a flexible and agile regulator that works in productive partnership with Government, regulatory colleagues and our stakeholders. Acknowledging the crucial frontline role pharmacists were playing, Council continued to make decisions with the objective that the regulatory burden would be 'Right-Touch', facilitating the frontline response, where possible, whilst maintaining standards and public protection. The Annual Report 2020/21 revisits and outlines the regulatory steps we have taken from the start of the pandemic and focusses on additional measures since early June 2020.

Whilst we acknowledge that the pandemic has unavoidably impacted upon some of our planned work, we are also pleased that it has not halted progression on all areas of reform. In fact, in some instances, the pandemic has produced new focus and has accelerated activity.

Despite the restrictions caused by necessary Government regulations, with Council's approval, we were able to plan construct and organise a summer registration assessment at short notice, staging the assessment as close as possible to the usual date and shortening the time period normally required for release of results and registration. We are grateful to the Department of Health for their support in lengthening the duration of training and to NICPLD for providing additional support to trainees that had endured significant pandemic-related pressures during their normal training period. The pass rate for the summer assessment was consistent with previous years despite the disruption in the lead up to the sitting and throughout the training year.

Council also postponed the annual CPD submission, giving additional time to practitioners to submit and we are pleased to record submission and compliance rates that were close to historic performances.

Council approved the new Standards for Initial Education and Training of Pharmacists in January 2021. The new Standards focus on a greater application of science, clinical

practice, risk management, patient consultation and the development of independent prescribing skills. This has provided a focus for collaborative work with the Department of Health (DoH), NICPLD and our local Universities to fully implement the new Standards by 2026/27 in an incremental manner. The result of our work in this area continues to ensure those entering the Register remain fit to practise and that, by the end of the process, all pharmacists joining the Register will be Independent Prescribers.

We have also made significant progress in preparing to move from a pre-registration training year, which we historically delivered, to a Foundation Training Year, delivered by the NICPLD and quality assured by us. These changes are on schedule to be implemented in July 2021.

On reforming and improving regulation, we were pleased to continue our work with the Department of Health and Social Care (DHSC) in England to progress its policy proposals for regulatory reform across all the regulators in the UK, which culminated in the launch of its public consultation in March 2021. We will continue to engage on this work as we seek to ensure improvements to our outdated legislation.

This year also saw us consult upon and publish new Guidance for Pharmacists on the provision of services in Northern Ireland. As services continue to change, this timely piece of Guidance aims to assist pharmacists in meeting their obligations to patients under the Code, whilst acknowledging the impact of a pharmacist's religion and/or beliefs on their willingness to provide any specific service.

Council is pleased to pay tribute to all the staff at the Pharmaceutical Society NI who, during a period of unprecedented change for the organisation, overlaid with the effects of the pandemic, have ensured that the core business of public protection has been maintained through their hard work, diligence, versatility and flexibility.

Looking forward to 2021/2022, we will continue to work in different ways as we emerge from the pandemic and we will update our strategy, take forward the work already started on educational reform and continue to seek modernised, fit for purpose legislation.



**Dr Jim Livingstone, President**



**Trevor Patterson, Chief Executive**

## 2. Who we are

We are the statutory regulatory body for pharmacists and pharmacies in Northern Ireland.

Pharmacists provide a range of pharmacy services to patients and the public in an increasing variety of contexts from community pharmacies, hospitals and GP surgeries to industry, education and research. It is our job to ensure that pharmacists and the services they deliver are safe and protect the wellbeing of those who use them. We do this through a system of personal and premises registration. Through our work, we aim to protect the public and patients and maintain public confidence in the pharmacy profession.

Our work touches the lives of pharmacists from the day they start their training until the day they retire or leave the Register.

Our role, powers and responsibilities are set out in The Pharmacy (Northern Ireland) Order 1976.

We are almost exclusively funded by registration and retention fees, paid by pre-registration trainees, pharmacists and premises owners. We are not funded by the public purse.

We have a governing Council which is independently appointed, following the public appointment principles, comprising 7 members of the public (lay members) and 7 pharmacy professionals (registrant members) and headed by a President. The Chief Executive of the organisation is accountable for organisational performance to the Council which sets the strategic direction of the organisation.

We are a fully devolved regulator and are accountable to the Northern Ireland Assembly.

We are based in Belfast and have a small regulatory staff team of 14 people.

## 3. What we do

We work with pharmacists from the day they start their training and throughout their career, to protect the public, by ensuring they are fit to practise and keep their skills and knowledge up to date.

Our key areas of focus are:

### **Education and Training**

- Setting standards, accrediting courses and approving qualifications for undergraduates and pharmacists including those for specialisms;
- Assuring the quality of the year-long pre-registration training that pharmacist trainees must undertake;

- Setting and running the final assessment that pharmacist trainees must pass before they can be registered as a pharmacist; and
- Ensuring that pharmacists complete the annual Continuing Professional Development (CPD) programme which is designed to ensure that they keep their skills and knowledge up to date and provide evidence of compliance at least annually.

### **Registering competent professionals**

Pharmacists must be registered with us to practise in Northern Ireland. Before registration, we check that they are appropriately qualified to join the Register.

### **Setting and monitoring compliance with Professional Standards**

Pharmacists and pharmacy premises must meet the relevant Standards to remain on the Register. We provide a suite of Guidance documents to assist pharmacists in this regard.

### **Acting when our Standards are not met**

Actions can include suspending someone from working as a pharmacist for a set period, placing conditions on their practice or removing their right to practise pharmacy by removing them from the Professional Register. In 2016, legislation was passed to allow us to act when our new Premises Standards are not met. However, these powers have not yet been brought into operation.

### **Investigating complaints about pharmacists and pharmacy premises**

We work with the Department of Health Northern Ireland (DoH) and the Health and Social Care Board (HSCB) to ensure that any complaint made in relation to the Fitness to Practise of a pharmacist is appropriately investigated and that pharmacy premises meet our Standards.

### **Oversight of our work**

Our work is subject to oversight by the Professional Standards Authority for Health and Social Care (PSA). Each year, the PSA assesses our performance against its Standards of Good Regulation. The PSA presents a report on all the regulators of healthcare professionals in the UK to the UK Parliament and lays it before the Northern Ireland Assembly<sup>1</sup>.

The PSA also reviews all final adjudication decisions in Fitness to Practise cases. The PSA has the discretion to refer to the High Court any final Statutory Committee decision if it considers that decision is insufficient for public protection - including protection of the health, safety and wellbeing of the public; maintaining public confidence in the pharmacy profession; and maintaining proper professional standards and conduct for pharmacists.

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<sup>1</sup> <http://www.professionalstandards.org.uk/what-we-do/our-work-with-regulators/read-performance-reviews>



The PSA can also, at an early stage, audit a sample of Fitness to Practise cases we have closed before they reached a full Fitness to Practise hearing.

We are accountable to the Northern Ireland Assembly for all that we do.

DoH appoints our Council members in line with the Code of Practice issued by the Office of the Commissioner for Public Appointments for Northern Ireland and is responsible for the conduct of these appointments. DoH approves Council Regulations before they are laid with the Northern Ireland Assembly for negative resolution.

## 4. About our Register

The number of pharmacists on the Register varies each year due to new pharmacists entering the Register, voluntary withdrawals and decisions made by the regulator.<sup>2</sup>

**Figure 1 – Registration Snapshot - Registered Pharmacists and Premises at end of financial year (31 May)**

Registered Pharmacists		
2018/19	2019/20	2020/21
2532	2731	2824

  

Registered Premises		
2018/19	2019/20	2020/21
548	554	552

**Figure 2 - Registered Pharmacists leaving the Register by 01 June annually**

Reason for Removal	2018/19	2019/20	2020/21
Voluntarily withdrawn	101	30	113
Removed for CPD non-compliance	12	12	18
Non-payment of fees	-	-	5
Struck off (Fitness to Practise)	-	1	-
Other	-	1	3
<b>Total</b>	<b>113</b>	<b>44</b>	<b>139</b>

<sup>2</sup> Registrants can be removed from the Register by the Regulator for non-payment of fees, non-compliance with CPD requirements, or as the outcome of a Fitness to Practise hearing.

## Response to Covid-19

To ensure that the Health and Social Care Service had an adequate number of pharmacists to tackle the Covid-19 Pandemic, on 03 April 2020, we opened the Temporary Register initially registering 260 individuals, with a further 5 individuals registered in a second phase. Emergency legislation permitted registration without the usual checks. To compensate for this, Council agreed the standards to be met by those that would enter the Register by this method, employers were written to and information was hosted on our website identifying additional checks that employers should make for all those on the Temporary Register prior to engaging them.

The Temporary Register remained open throughout 2020-21 to ensure an adequate number of pharmacists continued to be available during the second phase of the pandemic. No fees were charged for joining the Temporary Register. Council approved a policy for the exercise of the Registrar's powers to deal with concerns about those on the Temporary Register in line with emergency powers contained in the Coronavirus Act and this was published on 23 April 2020<sup>3</sup>. The Temporary Register can be viewed on our website<sup>4</sup> along with further statements on its operation<sup>5</sup>.

### Annual Retention

With a view to reducing the administrative burden on pharmacists and employers during the pandemic, Council, on 31 March 2020, announced an extension to the 2019/2020 registration year. The year was due to end on 31 May 2020 but was instead scheduled to end on 31 August 2020. All those pharmacists that were on the Register on 31 May 2020 remained so for an additional three months. The following registration year commenced on 01 September 2020 and ran until the normal year end, 31 May 2021. In accordance with fee regulations, there was no increase in fees for the longer registration year nor was there a reduction for the following shorter year.

## 5. Activity and Performance in 2020/21

This Annual Report reflects the work of the Pharmaceutical Society NI in the year 01 June 2020 to 31 May 2021. In July 2017, the Council of the Pharmaceutical Society NI ("Council") approved a 5-year Corporate Strategy which sets out what the organisation aims to achieve in the period 2017-22.

Within this plan, we describe our Vision:

*'The Pharmaceutical Society NI will be recognised and trusted as a leader of modern and effective healthcare regulation with a key role in ensuring pharmacy services are safe and meet high standards'.*

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<sup>3</sup> <https://www.psni.org.uk/wp-content/uploads/2020/04/Use-of-powers-for-temporary-registrations-of-persons-pdf.pdf>

<sup>4</sup> <https://www.psni.org.uk/search-register/>

<sup>5</sup> <https://www.psni.org.uk/publications/covid19-regulatory-statements-and-information/>

This Vision is underpinned by 6 high-level strategic objectives and related Goals, which set the course of the 5-year planning cycle from 2017 to 2022:

1. **To deliver high quality pharmacy regulation that is proportionate and cost-effective;**
2. **To set pharmacy standards that are evidence-based, output-focused, achievable and necessary for patient and public safety;**
3. **To conduct Fitness to Practise processes that are robust, timely and fair;**
4. **To ensure that pharmacy education and professional development is fit for purpose;**
5. **To be an accountable organisation with effective governance and operations; and**
6. **To communicate effectively, be accessible and responsive.**

## **Objective 1**

### **To deliver high quality pharmacy regulation that is proportionate and cost-effective**

Delivering high quality pharmacy regulation, which protects the public and maintains public confidence in the pharmacy profession, requires us to be focused on our core functions whilst also evolving our policies, practices and legislation to meet new challenges in healthcare and developments in regulatory thinking and practice. We also must be flexible and agile to address emerging issues, working with our partners and stakeholders.

#### **Response to Covid-19**

Responding to Covid-19 presented unique and unforeseen challenges to the organisation, which required considerable flexibility, agility and partnership working to maintain the delivery of high-quality pharmacy regulation.

#### **Business Continuity – Remote Working**

Following government advice around home working, the Business Continuity Plan was updated and engaged and work to improve the organisation's resilience and effectiveness to reflect the extraordinary nature of the emergency was prioritised. Work was undertaken and implemented to provide remote working systems and additional computing systems for staff and Council members, given the anticipated extent of the measures. In compliance with government advice, remote working was

maintained throughout 2020/21 with only essential and authorised office attendance permitted. The effectiveness of remote working and regulatory advice and guidance was regularly reviewed and updated during this period by the Executive Team following discussions with Council, partners and stakeholders.

Staff were supported through this period by holding regular video meetings between teams, all staff video meetings and by a staff daily update newsletter outlining regulatory changes, relevant government advice, staff news, social activities and working from home advice.

### **Governance arrangements**

Council agreed new processes for approving E-papers remotely, outside of the normal schedule of Council meetings, to facilitate efficient and effective decision -making and oversight during this fast-moving period. During 2020/21, Council made four decisions via E-paper. All decisions taken by E-paper were subsequently reviewed and ratified at scheduled, remotely held Council meetings. All Council meetings moved to an online secure platform during this period.

### **Collaborative working**

It was clear from an early stage in the pandemic that unilateral decision-making would be ineffective as the pandemic required actions which often crossed organisational jurisdiction and functions. Taking this into consideration, we quickly identified and worked closely with key stakeholders, including the Department of Health and our Regulatory partners across Northern Ireland and the UK. This resulted in collaborative decision-making and planning, particularly with regard to pre-registration training, CPD submission, the registration assessment, the creation of the Temporary Register and joint regulatory statements. Regulators shared information and best practice across all regulatory functions, with collaboration co-ordinated by the Chief Executives of The Regulatory Bodies (CEORB) group for the 13 regulators for health and social care professionals.

### **Goal 1. a. We will meet all performance standards in annual PSA appraisals in at least 4 of the next 5 years**

#### **Performance Review**

The PSA published its Performance Review of our regulatory activities in 2019/20<sup>6</sup>. In 2019/20, we met 15 out of the 18 Standards of Good Regulation. The PSA concluded that we did not meet Standard 3 because we do not collect or analyse Equality and Diversity data about our Council and Fitness to Practise Committee members. The PSA decided we had not met a further 2 standards relating to its inability to assess the impact of changes made as a result of an early stages audit of our Fitness to Practise processes carried out in 2018/19. The Council of the Pharmaceutical Society NI strongly disagreed with the conclusions the PSA reached in the 2019/20 performance

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<sup>6</sup> <https://www.professionalstandards.org.uk/publications/performance-review-detail/performance-review-psni-2019-20>

review and took the unprecedented step of publishing a response to the PSA's report, outlining its concerns<sup>7</sup>. We have met all performance standards of the annual PSA appraisals in 3 of the previous 5 years.

**Goal 1. b. We will secure policy agreement with DOH to make legislative and non-legislative changes required to modernise pharmacy regulation.**

### **Reforming our primary Legislation and Regulations**

Expectations of pursuing some of the substantive reforms we consider necessary to maintain public protection and flexible regulation going forward were undermined, at least in part, by the emergence of the Covid-19 pandemic. Whilst working collaboratively with DoH, we have been unable to make the hoped-for progress in relation to securing policy agreement on resolving the current legislative and organisational linkage between our Pharmacy professional leadership and regulatory roles. However, progress on regulatory reform has continued to be made at UK level.

#### ***Regulating healthcare professionals, protecting the public***

The UK Government's response to the 4-country consultation *Promoting Professionalism, Reforming Regulation* was published by the Department of Health and Social Care (DHSC) in July 2019<sup>8</sup>. In 2020-21, we continued to work closely with DHSC, other regulators and the PSA to develop the UK Government's policy proposals to reform the regulation of healthcare professionals across the UK. This work culminated in DHSC launching a public consultation on 24 March 2021 - *Regulating healthcare professionals, protecting the public*. The consultation sought views on proposals to modernise the legislation of the healthcare professional regulators. The proposed reforms cover 4 key areas. These are: Governance and Operating Framework; Education and Training; Registration; and Fitness to Practise. The Council of the Pharmaceutical Society NI considered the consultation carefully and planned to make a formal response in June 2021.

**Goal 1. c We will secure policy agreement with DOH for the statutory regulation and registration of technicians.**

- Policy in this area is led by DoH and requires Ministerial approval. We were a member of DoH's Pharmacy Workforce Review Project Board whose work is now complete, and we have participated in the development of a Pharmacy Workforce Review which was published in November 2020<sup>9</sup>. An Action Plan for

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<sup>7</sup> <https://www.psni.org.uk/wp-content/uploads/2021/07/Council-Response-to-PSA-Annual-PR-2019-20.pdf>

<sup>8</sup> [https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/820566/Promoting\\_professionalism\\_reforming\\_regulation\\_consultation\\_reponse.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/820566/Promoting_professionalism_reforming_regulation_consultation_reponse.pdf)

<sup>9</sup> <https://www.health-ni.gov.uk/publications/pharmacy-workforce-review-2020>

Implementation was published alongside the Workforce Review and a key recommendation was the urgent progression of work *to enable the registration and regulation and career development of the pharmacy technician workforce in NI in step with the rest of the UK*. This was accompanied by the related action to *introduce the necessary changes to policy and legislation to enable the registration and regulation of pharmacy technicians in Northern Ireland*. This commitment is extremely welcome and we will continue to work closely with DoH in 2021/22 to implement the necessary changes to ensure pharmacy technicians are registered through a robust and consistent regime and supported at the earliest opportunity.

**Goal 1. d. We will employ a financial strategy (to be reviewed annually) to increase efficiency and cost-effectiveness.**

Council approved a 3-year Financial Strategy in 2018-19 to ensure financial viability and support development through effective operation of the Pharmaceutical Society NI finances. The strategy is supporting and leading activities designed to improve effectiveness, reduce costs and minimise the fee burden on registrants. Once again, fees were maintained at previous levels having risen only once since 2009, evidencing the effectiveness of cost control and investment in technology.

**Goal 1. e. We will collaborate with other relevant Regulators and PSA to effect change designed to maximise use of shared principles and practices.**

We have continued to collaborate and work closely with regulators throughout Northern Ireland and the UK to share best practice and engage with the Governments on proposals for broader regulatory reforms. This work is led by the Chief Executives of The Regulatory Bodies (CEORB) group, for the 13 regulators for health and social care professionals, which met regularly in 2020/21. We are also a member of the NI Joint Regulators Forum which provides a platform for regulators to share information, new approaches and ideas about improving the impact and effectiveness of regulation in Northern Ireland. Our collaborative work is further outlined throughout this report and in response to the Covid-19 pandemic.

**Goal 1. f. We will deliver reforms developed as a consequence of Rebalancing Medicines Legislation and Pharmacy Regulation including the issue of criminal prosecution for dispensing errors.**

The Rebalancing Medicines Legislation and Pharmacy Regulation Programme Board<sup>10</sup> (Rebalancing Programme Board) has been tasked by the DHSC (London) to review relevant pharmacy legislation and regulation in the UK to ensure that it provides safety for users of pharmacy services, reduces, wherever possible, inflexible

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<sup>10</sup> <https://www.gov.uk/government/groups/pharmacy-regulation-programme-board>

legislation and affords regulators the agility to enable innovation and development of safe pharmacy practice.

In June 2018, the DHSC and the Devolved Governments consulted upon two draft Orders:

- Pharmacy (Preparation and Dispensing Errors – Hospital and Other Pharmacy Services) Order 2018; and
- Pharmacy (Responsible Pharmacists, Superintendent Pharmacists etc.) Order 2018.

The changes relating to Responsible Pharmacists and Superintendent Pharmacists propose to move responsibility for the setting of standards from primary legislation to the professional regulators. The proposals more clearly define the headline primary duties of Superintendents and Responsible Pharmacists, empowering the regulators to provide further detail in a more agile and responsive regulatory framework with the intention of delivering a more flexible and patient-centred model of regulation. We will continue to prepare for the development of a more agile and responsive regulatory framework for Superintendents and Responsible Pharmacists, should these powers come into effect.

The reforms also include the power to appoint a Deputy Registrar.

These draft Orders did not progress through Parliament in 2020/21 and continue to await progress in 2021/22. We will continue to work with the UK Departments on this important reform.

## **Objective 2**

### **To set pharmacy standards that are evidence-based, output focused, achievable and necessary for patient and public safety**

We set professional Standards for pharmacists in Northern Ireland to ensure that pharmacists' conduct, ethics and performance is such that it protects the public and maintains public confidence in the profession. Pharmacists must adhere to our Standards to remain on the Professional Register. We also set Premises Standards for Registered Pharmacies which await ministerial approval for the enabling of legislation before coming into operation. In the interim, we have non-legislative standards which are used by the profession as guidance and by the Inspectorate to aid inspection.

## **Response to Covid-19**

Pharmacists and pharmacies were placed under extreme pressures during the Covid-19 pandemic. In order to ensure that regulation did not stand in the way of pharmacists

delivering appropriate and innovative care during this period, whilst also ensuring we met our regulatory objective of protecting the public, we sought to provide clarification as to how we will approach regulation and the upholding of standards. Our approach was aimed at ensuring we maintained public safety and public confidence in pharmacy whilst not creating unnecessary barriers to delivering innovative care that would save lives and support the NHS.

During the first wave of the Covid-19 pandemic, we made a number of joint statements with other regulators and partners to assist pharmacists in Northern Ireland during the pandemic. These included the following:

- A Joint Regulators' Statement on Covid-19<sup>11</sup>
- A Joint Regulatory Statement with the General Pharmaceutical Council<sup>12</sup>
- A Joint Statement on Social Distancing in Pharmacies<sup>13</sup>
- A Statement on Collection and Delivery Services during the Covid-19 pandemic<sup>14</sup>.

During the second wave of the pandemic, we made the following joint statements to assist pharmacists in Northern Ireland during the pandemic:

- A Joint Statement to the Pharmacy Workforce from CPOs and Regulators<sup>15</sup>
- A Joint Regulators Statement on Covid-19<sup>16</sup>
- A Joint UK Chief Pharmaceutical Officers and Pharmacy Regulators' letter – Supporting pharmacy professionals throughout the Covid-19 pandemic<sup>17</sup>.

## **Goal 2. a. We will review and, where appropriate, enhance the current set of pharmacy standards**

### **Review of Standards and Guidance**

In 2020/21, the Covid-19 pandemic had an impact on progressing our rolling review of Standards and Guidance documents associated with the Code for Professional Standards, ethics and performance for pharmacists in Northern Ireland. 2020/21 did, however, see the introduction of a new Guidance document for pharmacists on the provision of services.

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<sup>11</sup> <https://www.psni.org.uk/news/joint-regulators-statement-on-covid-19/>

<sup>12</sup> <https://www.psni.org.uk/news/joint-statement-from-the-gphc-and-the-pharmaceutical-society-ni-on-a-regulatory-approach-in-challenging-circumstances/>

<sup>13</sup> <https://www.psni.org.uk/wp-content/uploads/2020/03/SocialDistancing-Letter-30-march.pdf>

<sup>14</sup> <https://www.psni.org.uk/wp-content/uploads/2020/04/Covid-19-Statement-on-Collection-and-Delivery-Services-09.04.20-1.pdf>

<sup>15</sup> [https://www.psni.org.uk/wp-content/uploads/2020/11/C0893\\_CPhO-Second-Wave-Letter\\_26nov.pdf](https://www.psni.org.uk/wp-content/uploads/2020/11/C0893_CPhO-Second-Wave-Letter_26nov.pdf)

<sup>16</sup> <https://www.psni.org.uk/wp-content/uploads/2021/01/Joint-Re-Issued-Statement-Final.pdf>

<sup>17</sup> <https://www.psni.org.uk/wp-content/uploads/2021/01/Joint-Letter-from-UK-CPOs-and-regulators-21-January-2021-v2.pdf>



## Guidance on the Provision of Services

The Council of the Pharmaceutical Society NI held a 12-week public consultation (08 July 2020 – 30 September 2020) on its proposals. After carefully considering the comprehensive responses, Council introduced new Guidance on the Provision of Services<sup>18</sup> in February 2021<sup>19</sup>.

The Guidance primarily provides help to pharmacists when considering their obligations under Principle 1 of the Code – *Always put the patient first* – and Standard 1.1.5 – *If, for any reason you are unable to provide a professional service, you have a professional responsibility to take reasonable steps to refer the patient or service user to an appropriate alternative provider for the service they require.*

The Guidance covers the following two main areas relating to the provision of services:

- the impact of a pharmacist’s religion and/or beliefs on their willingness to provide a specific service; and
- the medicine, service or medicinal device is not currently in stock or available.

Work will continue on the rolling review of standards and guidance documents in 2021/22.

### **Goal 2. b. We will test the on-going efficacy of pharmacy standards in context of the newly emerging HSC reform programme.**

With the Covid-19 pandemic, progress in relation to the broad HSC reform programme has been more limited and this has had a knock-on effect on our ability to test the ongoing efficacy of pharmacy standards in this context. We will continue to engage with DoH and monitor HSC reforms.

### **Goal 2. c. We will test and report on the feasibility of developing and applying new standards over and above Minimum Standards designed to encourage improved service quality.**

This work will be initiated upon completion of the Standards Review.

## Objective 3

**To conduct Fitness to Practise processes that are robust, timely and fair**

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<sup>18</sup> <https://www.psni.org.uk/wp-content/uploads/2021/02/Guidance-on-the-Provision-of-Services-February-2021.pdf>

<sup>19</sup> <https://www.psni.org.uk/news/council-launches-new-guidance-on-the-provision-of-services/>

The Fitness to Practise processes of the organisation are separated into 2 functions - investigation and adjudication - each of which is handled by a bespoke team. The investigation stage involves receipt or initiation of a complaint or concern which is assessed to ensure it is within the jurisdiction of the organisation. If so, an investigation seeking further evidence or information, sometimes involving partner organisations, is launched. Where a case to answer is identified, the matter will be resolved by either 1) the Registrar, 2) a Scrutiny Committee, or 3) a Statutory Committee.

## **RESPONSE TO COVID-19**

### **Remote Procedures**

In approaching Fitness to Practise during the pandemic and lockdown conditions, our top priority was public protection and patient safety. We continued to receive and log complaints and concerns which were risk-assessed and those which presented an immediate risk to the public were advanced if they met the threshold for Interim Order.

In the initial stage of the pandemic, other cases were advanced where the risk assessment changed or where it was possible to progress safely.

At the onset of the pandemic, we either heard or adjourned any cases already listed and only listed the following types of case:

1. Initial Interim Order applications;
2. Interim Order review hearings;
3. High Court applications to extend Interim Orders; and
4. Substantive Fitness to Practise review hearings.

All other face-to-face Statutory Committee hearings were initially adjourned, allowing us to prioritise Interim Order and Substantive Order reviews.

We rapidly moved to secure online software to carry out priority hearings remotely. A full procedure document for remote online hearings was developed for the benefit of participants, panels and the public<sup>20</sup>.

After the initial phase of the pandemic, all Fitness to Practise referrals to the Statutory Committee were subject to remote Case Management Meetings, chaired by the Chair of the Statutory Committee. Statutory Committee referrals were listed for remote hearings with the agreement of the parties to the proceedings.

As the context of the pandemic evolved, a policy and procedures document was introduced, in May 2021, for holding physical Statutory Committee hearings<sup>21</sup>. If agreement cannot be reached on holding a remote hearing, subject to a full risk assessment, the Chair can now direct that a full or part physical hearing takes place. All Interim Order applications and reviews are still to take place remotely and all full Statutory Committee hearings scheduled to proceed physically will be subject to a full

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<sup>20</sup> <https://www.psn.org.uk/wp-content/uploads/2021/03/PSNI-SOP-remote-hearings-14.05.20-.pdf>

<sup>21</sup> [Policy-and-Procedure-for-physical-hearings-04.05.21.pdf \(psni.org.uk\)](https://www.psn.org.uk/wp-content/uploads/2021/05/Policy-and-Procedure-for-physical-hearings-04.05.21.pdf)

risk assessment and must carefully follow the prescribed procedures to ensure the safety of all participants.

Further information on our approach to Fitness to Practise during the pandemic can be found on our website<sup>22</sup>.

The complaints which were opened in 2020/21 as Fitness to Practise matters are as follows:

**Figure 3 - Sources of Complaints**

Source	2018/19		2019/20		2020/21	
	No.	%	No.	%	No.	%
Anonymous	-	0%	5	10.4%	2	5.4%
DoH	2	8%	5	10.4%	3	8.1%
Employer	-	0%	2	4.2 %	1	2.7%
HSCB	1	4%	-	0%	-	0%
Other regulator	-	0%	-	0%	-	0%
Pharmacy	1	4%	2	4.2%	-	0%
Public	12	50%	29	60.4%	24	64.9%
Police Service	-	0%	-	0%	-	0%
Registrar	3	13%	-	0%	-	0%
Self-referral	5	21%	5	10.4%	7	18.9%
<b>Total</b>	<b>24</b>	<b>100%</b>	<b>48</b>	<b>100%</b>	<b>37</b>	<b>100%</b>

**Figure 4 - Stages of investigation for cases closed in 20/21**

Closed Cases	Registrar	Scrutiny Committee	Statutory Committee	Total
Lack of jurisdiction	26	-	-	26
No Further Action	8	-	-	8
Advice	-	-	-	-
Warning		-	-	-
Undertakings		-	1	1
Conditions			2	2
Suspension			1	1
Removal			-	-
<b>Total</b>	<b>34</b>	<b>0</b>	<b>4</b>	<b>38</b>

Of the 34 cases closed by the Registrar in 2020/21, 26 were closed (or not opened) for lack of jurisdiction and the remaining 8 (which met the jurisdictional test) were

<sup>22</sup> <https://www.psn.org.uk/publications/covid19-regulatory-statements-and-information/>

closed for failure to meet the Threshold Criteria for referral to a Fitness to Practise committee.

Of the 34 cases closed in 2020/21, 5 were opened prior to 1<sup>st</sup> June 2020.

As of 31<sup>st</sup> May 2021, 19 Fitness to Practise case remain open.

The Scrutiny Committee considered 5 cases in 2020/21, determining that all 5 cases should be referred to the Statutory Committee.

The Statutory Committee also carried out 2 review hearings, relating to a suspension order determined in 2019/20.

Outcomes and the full determinations of all public Statutory Committee hearings can be found on our website<sup>23</sup>.

## Interim Orders

A case will be referred directly to a Statutory Committee by the Registrar based on the evidence available and where it is considered to be high risk to public safety and the Registrar considers that the Statutory Committee should consider making an Interim Order. The Statutory Committee will then hold an Interim Order hearing to receive evidence and make decisions based on the *prima facie* case presented. The Statutory Committee can determine to take no action, place conditions on a pharmacist's practice or suspend a pharmacist for up to 18 months, reviewing the order every 6 months. After 18 months, an extension to the Interim Order can be granted only upon application to the High Court. An Interim Order is designed to address risk to the public, pending the completion of full Fitness to Practise proceedings.

There were 3 new Interim Order applications and 4 Interim Order reviews in 2020/21, relating to 3 registrants. There were no applications made to the High Court for extensions to existing Interim Orders.

### **Goal 3. a. We will improve timeliness, efficiency and cost of Fitness to Practise processes and report on progress made**

#### **Key Performance Indicators – Closed Cases**

- 30 out of 34 cases closed by the Registrar were closed in less than 26 weeks with cases taking a median of 10 weeks to close. All cases that did not meet the 26-week indicator involved more complex investigations and/or were reliant upon the receipt of third-party information in order to progress.
- None of the 4 cases closed by the Statutory Committee were closed in less than 60 weeks. One of the cases involved an investigation and prosecution by an external body – the Statutory Committee hearing was also adjourned for a period of months, due to the Covid-19 pandemic. Another case was subject to a

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<sup>23</sup> <https://www.psni.org.uk/psni/fitness-to-practise/determinations-of-statutory-committee/>

significant external investigation by a public body, whilst progressing a third case was dependent on information being provided to the regulator, as part of an employer investigation, which caused significant delays.

## **New Threshold Criteria<sup>24</sup>**

The Threshold Criteria forms an important part in the early stages of the Fitness to Practise processes. It is designed to provide a decision-making framework to assist the Registrar in the delivery of consistent, proportionate and reasonable decisions on whether to refer Fitness to Practise allegations to the Scrutiny Committee or to close an investigation.

After an 8-week public consultation on revised Threshold Criteria, the Council of the Pharmaceutical Society NI approved and introduced new Threshold Criteria on 30 June 2020<sup>25</sup>.

## **New Guidance on Raising a Concern and Jurisdictional Test**

In June 2020, we updated our Guidance for members of the public and pharmacists on how to raise a concern about a pharmacist or a pharmacy registered with us<sup>26</sup>. Underpinning this new Guidance was an enhanced Jurisdictional Test and related processes for assessing whether the concern raised falls within our powers to investigate and take action, if appropriate. The updated Guidance and Jurisdictional Test are designed to improve clarity on when we cannot investigate a concern raised, improving efficiency and effectiveness and bringing greater clarity to members of the public and those raising concerns.

### **Goal 3. b. We will ensure regular reports on learning from Fitness to Practise cases are effectively disseminated to pharmacists and other interested parties.**

Ensuring that pharmacists are able to learn from Fitness to Practise cases is extremely important to maintaining public safety and the upholding of standards. All determinations of Statutory Committee hearings are published on our website. Any additional learnings produced by the Statutory Committee in relation to closed Fitness to Practise cases are circulated to pharmacists in Northern Ireland through our Regulatory Newsletter. In addition, the Scrutiny Committee produces an annual report which identifies trends and learnings and is available on our website<sup>27</sup>.

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<sup>24</sup> <https://www.psni.org.uk/news/council-launches-consultation-on-new-fitness-to-practise-threshold-criteria/>

<sup>25</sup> <https://www.psni.org.uk/wp-content/uploads/2021/04/Threshold-Criteria-30.06.20.pdf>

<sup>26</sup> <https://www.psni.org.uk/wp-content/uploads/2020/11/Guidance-on-Raising-Concerns-about-a-Pharmacist-Pharmacy-or-Pharmacy-Owner-in-Northern-Ireland-1.pdf>

<sup>27</sup> <https://www.psni.org.uk/psni/fitness-to-practise/fitness-to-practise-statistics/>

**Goal 3. c. We will develop Fitness to Practise processes for Pharmacy Technicians.**

This goal is dependent on completion of Goal 1.c. and subsequently no work was pursued in this area in 2019/20 (see page 10).

**Appointment of new members to the Statutory and Scrutiny Committees**

**Appointments to the Statutory and Scrutiny Committees**

The 8-year tenure of a number of members of the Statutory and Scrutiny Committees came to an end in October 2020. Council, after an independent recruitment process, made the following appointments to the Statutory and Scrutiny Committees in June 2020, with their tenures beginning in October 2020:

**Statutory Committee**

- Chair Mr Gary Potter, BL.
- Vice Chair Mr Graeme Clarke
- Lay Member Mr Derek Wilson
- Registrant Member Dr Briegeen Girvin
- Registrant Member Ms Liz Kerr
- Registrant Member Ms Paula McMaster
- Registrant Member Mr Stephen Toner
- Registrant Member Dr Mark Timoney

**Scrutiny Committee**

- Chair Ms Nicole Lappin, BL.
- Vice Chair Ms Louisa Fee
- Registrant Member Ms Rachel Lloyd
- Registrant Member Mr Andrew Dawson

The full list of members of the Statutory and Scrutiny Committees can be found on our website<sup>28</sup>. All new Statutory and Scrutiny Committee members undertook Fitness to Practise training and all existing members undertook refresher training in September 2020.

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<sup>28</sup> <https://www.psn.org.uk/psni/fitness-to-practise/fitness-practise-committees/>

## **Objective 4**

### **To ensure that pharmacy education and professional development is fit for purpose**

#### **Response to Covid-19**

The Covid-19 pandemic presented significant challenges for the organisation in ensuring that pharmacy education and professional development remained fit for purpose. Acknowledging the unprecedented pressures pharmacists, trainees, tutors and pharmacies were being placed under, and the evident public need for pharmacy services, our approach necessitated a balance between the needs of service provision, the protection of the public and the ongoing wellbeing and development of trainees and tutors.

To respond in an agile and flexible way, several phases of activity were carried out in conjunction with other stakeholders.

This work was guided by several key principles:

- maintenance of standards for entry to the Register to protect patient safety and quality care to patients;
- safeguarding the welfare of trainees whilst also ensuring that the work of trainees and tutors is given suitable recognition; and
- minimising blockages in the pipeline for newly qualified pharmacists to join the workforce.

#### **Pre-registration training**

Rapid collation and analysis of trainee, tutor and employer feedback about immediate issues arising in training was undertaken. This informed decision-making and discussions with DoH and other stakeholders on actions required.

A dedicated Covid-19 web page was established to signpost trainees, tutors, training organisations and employers to regulatory statements, training updates and Frequently Asked Questions. Regular update emails were also sent to trainees, tutors, training organisations and employers.

Working with the DoH, and in recognition of the inevitable disruption caused at the early stages of the pandemic, additional funding was secured to support a further period of training - up to August 2020 - to allow trainees additional time to complete compulsory aspects of training and continue their preparation for the registration examination.

A flexible and pragmatic approach was taken to completion deadlines for compulsory aspects of training, recognising the additional pressures placed on trainees and tutors.

Adjustments were made to streamline the pre-registration application process whilst still maintaining its integrity.

The multiple live training events to support trainees and supervising tutor pharmacists were re-configured to a mix of live webinars and recorded lectures.

Collaborating with DoH and NICPLD, additional ongoing learning support was provided to newly qualified pharmacists during their first year of registration to aid development.

## **Registration Assessment**

Agreement with DoH was reached to postpone the Summer registration examination from June 2020 to August 2020. Thorough planning and risk assessment of venues was undertaken to ensure strict social distancing and Covid-19 control measures. This ensured that the health, safety and wellbeing of candidates and Pharmaceutical Society NI staff and Invigilators was maintained. A second registration examination was held in December 2020 under the same conditions. This was primarily for those trainees who were required to shield as a result of Covid-19, affording those affected an opportunity to join the Register in 2020.

## **Undergraduate Education**

We collaborated with the GPhC and Northern Ireland's 2 Schools of Pharmacy to ensure accreditation was pragmatically delivered to enable the timely completion of MPharm degrees, whilst ensuring evidence of attainment of learning outcomes was maintained and enabling entry of graduates into the pre-registration training programme.

## **Continuing Professional Development**

Council approved a temporary adjustment to the CPD Framework for 2019/2020 which postponed the 2019/20 CPD submission date of 31 May 2020. On 09 July 2020, it was announced that Council had affirmed its decision to end the 2019/2020 registration and CPD year on the 31 August 2020 with CPD portfolio submissions due on that date. In coming to its decision, Council was cognisant of the level of pandemic response at that time and the 3 key objectives for healthcare regulators: ensuring patient safety; setting and upholding standards; and maintaining public confidence in the profession. On 14 September 2020, it was announced that a submission rate of 98.4% had been achieved by the end of August 2020 consistent with previous years.

## **Outputs from the 2020/21 pre-registration training programme**

142 trainees entered the pre-registration programme in the summer of 2020/21.

134 new pharmacists joined the Register after completing the pre-registration programme in 2019/20.



## **Progress against Corporate Strategy Objectives**

- a. We will review the Pre-Registration Framework and implement necessary improvements.**

In previous years, our review of the pre-registration programme has focused on improving the quality management and control aspects of the pre-registration training year.

### **Learning from Covid-19**

At the end of the 2019/20 training year, trainees were asked to provide feedback, share their learning about how they managed training during Covid-19 and share advice they may have for future trainees about how to manage and cope with training. The report was shared with the 2020/21 intake of trainees in January 2021. It included advice and tips about self-care, the importance of maintaining physical and mental health during training, along with signposting to relevant counselling and support agencies.

- b. We will review and improve undergraduate and accreditation standards with our partners.**

- c. We will explore the feasibility of developing a joint education strategy with both NI Universities and GPhC.**

### **Adoption of new Standards for Initial Education and Training of Pharmacists (IET)**

The GPhC in conjunction with the Pharmaceutical Society NI consulted upon the revision of the Standards for Initial Education and Training of Pharmacists throughout the UK in 2019. GPhC published the revised Standards in December 2020 and the Council of the Pharmaceutical Society NI adopted the revised Standards in January 2021<sup>29</sup>. The new Standards for Initial Education and Training of Pharmacists apply across the UK.

Part of the reform includes implementing a connected continuum of 5 years of education and training with greater application of science and clinical practice, development of skills and decision-making, risk management, patient consultation and development of independent prescribing skills.

Through 2020/21, Pharmaceutical Society NI worked closely with GPhC through an advisory group to begin the process of reforming the initial education and training of pharmacists and to introduce the new Standards in phased approach starting in July 2021 with the aim of full implementation by 2026/27.

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<sup>29</sup> [The Pharmaceutical Society NI Council adopts new Standards for the Initial Education and Training of Pharmacists. - Pharmaceutical Society of Northern Ireland \(psni.org.uk\)](https://www.psni.org.uk/news/the-pharmaceutical-society-ni-council-adopts-new-standards-for-the-initial-education-and-training-of-pharmacists)

## **Progress in development of Foundation Year and IET reforms**

We established the 'NI Initial Education and Training Implementation Reform Group' consisting of local stakeholders involved in implementation of changes including the Department of Health, NICPLD and the 2 NI Schools of Pharmacy to bring forward the necessary initial changes for July 2021.

We worked closely with NICPLD and other local stakeholders to implement a smooth transition to the 'Foundation Training Year' which trainee pharmacists will be required to undertake in order to register as pharmacist in Northern Ireland and which will replace the current pre-registration training programme from July 2021 onwards.

We continue to be a member of the Education Governance Oversight Board (EGOB). The Board's role is to oversee post-graduate education and training and to create a flexible, adaptable workforce who can easily move between care settings and provide increasingly complex care.

### **Accreditation**

In accordance with our Memorandum of Understanding (MoU) with the GPhC, in 2020/21, we continued to work closely with our colleagues on a programme of rolling accreditations of universities. In Spring of 2021, the schools of Pharmacy at Ulster University and Queens' University of Belfast underwent an interim accreditation visit of their respective MPharm degrees. The interim visit is part of the normal rolling quality assurance programme for accreditation of MPharm degrees with the report to be finalised and published on our website in the Summer of 2021<sup>30</sup>.

## **CPD Report 2019/20**

All pharmacists in Northern Ireland are legally required to complete CPD to remain on the Professional Register. The purpose of CPD is to help pharmacists maintain and further develop their competency and performance thereby enhancing patient safety and public confidence in the pharmacy profession.

Under certain extenuating circumstances, the Registrar has the power to permit registrants to forego the submission of a CPD portfolio in that CPD year. In 2019/20, the Registrar received 181 applications for extenuating circumstances, granting 179 of those applications<sup>31</sup>. In Summer 2020, 2506 registrants submitted CPD portfolios – a compliance rate of 99.88%. 23 registrants failed to submit a CPD portfolio and were subsequently removed from the Register.

A total of 10% of CPD submissions were selected for assessment by a combination of random selection and focused selection. Of this number, 89.25% met the required standard at first assessment and 100% met the standard after going through a remediation process.

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<sup>30</sup> [Education - Pharmaceutical Society of Northern Ireland \(psni.org.uk\)](https://www.psn.org.uk)

<sup>31</sup> The procedure relating to extenuating circumstances is outlined in the CPD Framework 2014 - <https://www.psn.org.uk/wp-content/uploads/2012/12/CPD-Framework-and-Standards-2014-COMPOSITE-Version.pdf>

**Figure 5 - CPD Statistics**

<b>CPD STATISTICS - CPD YEARS 2017/18 - 2019/20</b>		<b>2017/18</b>	<b>2018/19</b>	<b>2019/20</b>
<b>CPD Submissions</b>				
CPD submissions	Records submitted	2,320	2,406	2,506
<b>Extenuating Circumstances</b>				
EC applications	Applications submitted	152	173	181
	Applications granted	145	172	179
<b>Non-compliance actions</b>				
Notices Issued	Investigation letter	26	34	69
	Notice of intention to remove	26	18	29
	Notice of removal	12	15	19
Removals	Removals for non-submission	12	15	19
Remedial Measures	No entering remedial measures	24	29	25
Removals	Removals after remedial measures	0	0	0
<b>Compliance</b>				
	Overall compliance with CPD process	99.48%	99.38%	99.24%

**Goal 4.d. We will review CPD processes and develop a strategy for the establishment of a Continuing Fitness to Practise regime.**

#### **Consultation on Revised CPD Framework**

Council approved a new CPD Framework to be introduced for the 2020/21 CPD year. However, considering the onset of the Covid-19 pandemic, Council decided to delay the implementation of the new CPD Framework until the 2021/22 CPD year to ensure pharmacists are given adequate time to prepare and adapt to the revised Framework.

#### **Continuing Fitness to Practise (CFtP) plans**

We maintain an active involvement on the inter-regulatory Continuing Professional Practice Revalidation Working Group. Plans for pharmacists' CFtP in Northern Ireland will be subject to public consultation and Council approval. Current plans for CFtP are being built on the platform of the revised version of the 2014 CPD Framework and the evidence gained from operations over the last 5 years, with the potential for the addition of a peer review and additional practice specific assessments. We continue

to work with stakeholders to further CFtP research and develop these proposals after the introduction of the planned revision to the CPD Framework which is scheduled for CPD year commencing June 2021.

## **Objective 5**

### **To be an accountable organisation with effective governance and operations**

The Council of the Pharmaceutical Society NI is the governing body of the organisation and is responsible for ensuring its statutory duties are met. It sets strategic objectives for the organisation and monitors the performance of the Chief Executive in line with its statutory purpose.

It holds the Chief Executive to account for organisational performance as well as ensuring that the financial affairs of the organisation are conducted properly.

Council members are appointed by DoH in accordance with the principles of the Public Appointments Process and based on the competence of the applicants.

The Council has 14 appointed members with an equal number of lay and registrant members and is led by a President.

The Council has a structure of remuneration and expenses based on attendance at meetings which is published by DoH in recruitment activity.

#### **Response to Covid-19**

Council agreed new processes for approving E-papers remotely, outside of the normal schedule of Council meetings, to facilitate efficient and effective decision-making and oversight during this fast-moving period. During 2020/21, Council made four decisions via E-paper. All decisions taken by E-paper were subsequently reviewed and ratified at scheduled, remotely held Council meetings. All Council meetings moved to an online secure platform during this period. All public sessions remained open to the public and were regularly attended by the Professional Standards Authority.

#### **Goal 5.e. We will review and improve organisational governance.**

Council concluded its Governance Review in January 2020, reducing its 6 non-Statutory Committees to 3. In 2020/21, work was ongoing on updating the Corporate Governance Handbook to reflect the changes made to the Governance structures. This work will be completed in early 2021/22.

The new non-statutory Committees of Council are:

- Audit and Risk (A&R) Committee
- Finance & Performance (F&P) Committee

- Remuneration Committee

**Figure 6 - Council Members 2020 – 2021**

Members	Membership type	Committee Membership
<b>Dr Jim Livingstone – President</b>	Lay Member	Remuneration Committee (Chair)
<b>Mr Jonathan Patton – Vice President</b>	Lay Member	Remuneration Committee
<b>Mr Ciaran Hunter</b> (Council tenure ended September 2020)	Lay Member	• Finance & Performance Committee (Chair)
<b>Mr Mark McCrudden</b>	Registered Member	• Finance & Performance Committee (Chair from September 2020)
<b>Mr Mark Campbell</b> (Council tenure ended September 2020)	Lay Member	• Finance & Performance Committee
<b>Ms Sandra Cooke</b>	Registered Member	• Finance & Performance Committee
<b>Ms Colleen Duffy</b>	Registered Member	• Audit & Risk Committee
<b>Laura Murphy</b> (Council membership ended August 2020 when she took up post as Registrar)	Registered Member	• Audit & Risk Committee
<b>Professor Patrick Murphy</b>	Lay Member	• Finance & Performance Committee
<b>Mr James Perry</b> (Council tenure ended September 2020)	Lay Member	• Audit and Risk Committee (Chair)
<b>Mrs Carol Moore</b>	Lay Member	• Audit & Risk Committee (Chair from September 2020) • Remuneration Committee
<b>Ms Chanel Jones</b>	Registered Member	• Finance & Performance Committee
<b>Mr Barry Mimmagh</b>	Registered Member	• Audit & Risk Committee
<b>Mrs Alison Ragg</b>	Registered Member	• Audit & Risk Committee

Council met on 6 occasions in 2020/21.

**Figure 7 - Council Attendance 2020 – 2021**

Council Member Name	Membership Type	Gross Pay (£)	Council meetings attended	Committee Membership & Attendance	Additional days served
<b>Dr Jim Livingstone</b>	Lay Member President Chair of Remuneration Committee	19,390	6 of 6	Remuneration 1 out of 1	48.5 *
<b>Jonathan Patton</b>	Lay Member Vice President	1,064	6 of 6	Remuneration 1 out of 1	2**
<b>Mark McCrudden</b>	Registrant Member Chair of Finance & Performance Comm	1,631	4 of 6	Remuneration 1 out of 1 Finance & Performance 6 out of 6	0.5**
<b>Carol Moore</b>	Lay Member Chair of Audit & Risk Comm	1,895	6 of 6	Remuneration 1 out of 1 Audit & Risk 3 out of 3	1**
<b>Patrick Murphy</b>	Lay Member	1,210	6 of 6	Finance & Performance 6 out of 6	0
<b>Sandra Cooke</b>	Registrant Member	236	1 of 6	Finance & Performance 1 out of 6	0
<b>Colleen Duffy</b>	Registrant Member	1,180	6 of 6	Audit & Risk 1 out of 3	0
<b>Barry Mimmagh</b>	Registrant Member	1,358	6 of 6	Audit & Risk 1 out of 3	2.5**
<b>Chanel Jones</b>	Registrant Member	1,716	6 of 6	Finance & Performance 5 out of 6	0.5**
<b>Alison Ragg</b>	Registrant Member	1,653	6 of 6	Audit & Risk 3 out of 3	2.5**
<b>Ciaran Hunter</b>	Lay Member & Chair of Resources (Finance & Performance) Committee. Council tenure ended September 2020.	758	2 of 2	Resources 1 out of 1	0
<b>Jim Perry</b>	Lay Member & Chair of Audit & Risk Committee. Council tenure ended September 2020.	379	2 of 2	Audit & Risk 1 out of 1	0
<b>Laura Hughes</b>	Registrant Member & Member of Audit & Risk Committee until July 2020. Took up post as Registrar in August 2020.	738	1 of 1	Audit & Risk 0 out of 0	0
<b>Mark Campbell</b>	Lay Member. Council tenure ended in September 2020.	391	2 of 2	Audit & Risk 0 out of 1	0

\*Additional days spent in supporting the Public Appointments Unit with Council recruitment, attending external meetings, and attending internal meetings with the Chief Executive and other staff.

\*\*Additional days spent at other meetings e.g., Council Task & Finish Groups and/or representing Council at external meetings and events.

During the year, the Society paid attendance fees to Council members totalling £33,599 (2020: £32,962). The Society paid £nil expenses (2020: £5,368) during the year. The use of virtual meetings due to Covid-19 best practice has reduced the expense amount claimed during this year.

**Goal 5. c. We will annually review audit schedules, risk management processes and performance measurement organisationally and implement necessary changes for improvement**

## **Internal Control**

Council is responsible for ensuring that the organisation operates an appropriate system of risk management and for ensuring appropriate operational effectiveness. Under its new governance structure, 2 Committees of Council contribute to providing appropriate internal control mechanisms and will work to improve the annual audit schedules, risk management processes and performance measurement organisationally. They are the Audit & Risk Committee and the Finance & Performance Committee.

### **Audit & Risk Committee**

The Audit & Risk Committee is responsible to Council for oversight of internal and external audits and confirming that adequate strategies are in place for the identification and management of risk. Specifically, the Audit & Risk Committee is responsible for:

#### **Risk Management**

- Reviewing the policies and processes for identifying and assessing business risks and the management of those risks by the organisation and making recommendation to Council for any necessary changes; and
- Considering the effectiveness of the management of policies and processes for risk, control and governance including regular review of the Risk Register and escalating any issues to Council in a timely manner.

#### **Governance**

- Ensuring the regular review and ongoing maintenance of the Corporate Governance Handbook, ensuring adherence to same and making recommendations to Council for any necessary improvements in line with best practice.

#### **External Audit**

- Making recommendation to Council on the appointment of an external auditor; and
- Overseeing the external audit process.

## **Internal Audit**

- Appointing a suitably qualified internal auditor; delegated authority;
- Overseeing the internal audit process;
- Reviewing and agreeing the internal audit strategy and programme and, where appropriate, requesting that internal audit undertakes specific work;
- Satisfying itself that the internal audit function is adequately resourced and has appropriate standing within the organisation;
- Reviewing the annual audit report;
- Considering management's response to any internal audit recommendations;
- Third party audits (e.g. PSA);
- Considering reports; and
- Monitoring management responses and escalating any significant issues to Council.

## **Management**

- Seeking assurance of compliance with statutory instruments and appropriate financial management systems and advising Council accordingly; and
- Carrying out any functions attributed to the Committee or Chair in the Whistleblowing Policy.

## **Annual Accounts and Financial Reporting**

- Receiving the Annual Accounts and Annual Report from the Finance & Performance Committee with a view to recommending adoption to Council, considering external and internal audit reports and agreeing recommendations for approval to Council.

Upon completion of an audit needs and risk assessment, the Audit & Risk Committee approved a new 3-Year Internal Audit Strategy in January 2021.

In 2020/21, the Audit & Risk Committee continually reviewed the Risk Register at each meeting and approved changes to policies and processes arising from the Covid-19 pandemic. It commissioned internal audits on the following:

- Covid-19 Business Impact Review
- IT Systems and Security Review
- Communications and Engagement Strategy Review



## Figure 8 - Internal Audits Completed 2020/21

Audits	Rating
Covid-19 Business Impact Review	Satisfactory Control Rating – zero priority 1 recommendations
IT Systems and Security Review	Satisfactory Control Rating - zero priority 1 recommendations
Communications and Engagement Strategy Review	Satisfactory Control Rating - zero priority 1 recommendations

The internal auditors have provided an overall “satisfactory” level of control for relevant internal audits carried out in 2020/21 whilst identifying recommendations for improvement. The Executive Team accepted all recommendations and have action plans in place to deliver the improvements which will be reported to Council via the Audit & Risk Committee.

### Finance & Performance Committee

The Finance & Performance Committee is responsible for:

#### Budgeting & Financial Performance

- Scrutinising the annual budget and operational plan prepared by the Executive Team and advising Council on their adoption;
- Reviewing management accounts and monitoring performance against the financial and resource objectives approved in the operational plan and budget;
- Reviewing financial forecasts, annual or interim financial statements and monitor operational financial performance against the operational plan;
- Satisfying itself that appropriate arrangements exist to identify and mitigate significant financial and performance related risks; and
- Satisfying itself that appropriate arrangements exist to identify and mitigate significant financial risks associated with the Pharmacy Forum.

#### Delegated authority

- Authorising unbudgeted spending in accordance with the limitations below:
  - A maximum of £5,000 per event against any budget head for operational reasons; and
  - A maximum authority of £15,000 cumulative in any given financial year;
- Approving changes to individual budgetary heads within the overall agreed budget.

#### Financial Strategy

- Providing advice to Council on a suitable/appropriate financial strategy for approval, reviewing and monitoring compliance with same and escalating any significant issues to Council; and
- Advising Council on and reviewing the investment policy, including risk appetite, investment parameters and ethical policy and advising Council on the adoption of any proposed changes.

## **Financial Reporting**

- Providing an Annual Report and Accounts to the Audit & Risk Committee; and
- Providing Council with a report on budget, cash flow and forecasts at intervals determined by Council.

## **Performance**

- Providing advice to Council on suitable strategic KPIs for approval;
- Reviewing and monitoring performance against KPIs and escalating any significant issues to Council;
- Providing advice to Council on appropriate HR and ICT policies for approval;
- Monitoring performance against approved policies and escalating any significant issues to Council; and
- Reviewing the effectiveness of policies and procedures for measuring Council's and Council members' performance and providing advice to Council on improvements.

### **Goal 5. a. We will establish effective deputising arrangements for the Registrar**

In 2017/18, we worked closely with DoH and DHSC to ensure that the then planned Section 60 Orders relating to the Rebalancing Medicines Legislation and Pharmacy Regulation Programme Board's work would include the power to have a Deputy Registrar, thereby addressing an obvious anomaly in our current primary legislation. We continue to await the laying of a completed Section 60 Order which will enable the appointment of a Deputy Registrar. As an interim measure, we have developed a protocol with the Department designed to accelerate approval of an Interim Registrar during unexpected or prolonged absence of the substantive Registrar.

### **Goal 5. b. We will secure policy agreement with DOH on resolving the current Pharmacy Professional Leadership linkage with the Regulatory function.**

Whilst continuing to work collaboratively with DoH, we have been unable to make progress in relation to securing policy agreement with DoH on resolving the current legislative and organisational linkage between our Pharmacy professional leadership and regulatory roles. We continue to work on the broader reform programme being led by DHSC and will continue to work with DoH on this issue in 2021/22.

### **Goal 5. d. We will develop a new ICT Strategy**

In April 2021, Council considered a review and revision of the ICT Strategy introduced in 2019, the purpose of which was to understand how existing systems and platforms are managed and to identify where improvements could be made to address perceived risks, better support business operations and deliver improved business outcomes. It also considered how existing technology and processes could be further leveraged to enhance staff productivity, to increase IT security controls and to improve business operations. Council decided to further assess the review and the revised draft strategy prior to approval its implementation. This work will be completed in 2021/22.

### **Goal 5. f. We will formulate and implement a new HR strategy to improve organisational resilience, efficiency and effectiveness.**

A revised Human Resources Strategy, with a view to improving organisational resilience, efficiency and effectiveness, began implementation in February 2019. In 2020/21, continued developments were made on agile working arrangements which were invaluable in light of the Covid-19 pandemic. Work will continue on the implementation and assessment of the HR Strategy in 2021/22.

### **Goal 5. g. We will work with government and other relevant agencies to ensure robust arrangements are in place to manage the effects upon pharmacy regulation in NI resulting from the UK's exit from the EU, including the provision of suitable transition arrangements.**

We have continued to liaise closely with DHSC London, DoH, the Department for Business, Energy and Industrial Strategy (BEIS) and the other healthcare regulators, including our counterparts in GB and the Republic of Ireland, to plan and effect the legislative and operational changes required, as a result of the UK leaving the European Union and European Economic Area.

Our resources have continued to be focused on the recognition of professional qualifications post-Brexit, in particular with the Republic of Ireland, including the underpinning legislative authorities.

## **Objective 6**

### **To communicate effectively, be accessible and responsive**

To deliver high quality pharmacy regulation, communicating effectively, whilst being accessible and responsive is crucial to delivering against our Corporate Strategy and regulatory responsibilities.

#### **Responding to Covid-19**

The various measures introduced last year in response to the Covid Pandemic largely remain in place. We continue to deliver against our communication principles in an

agile and flexible manner to ensure that our stakeholders are kept informed of the necessary regulatory information.

Since March 2020, the Covid-19 page on our website has been our repository for regulatory statements and Frequently Asked Questions. Registrants continue to be notified directly by mass email of important regulator statements and are provided with periodic updates on all new statements made. In early 2021, we reintroduced the Regulatory Newsletter which provides a summary of key issues and announcements<sup>32</sup>.

From the analytics of our website, this method of communication was highly successful with visits peaking following each key message sent by email, combined with a constant level of daily interaction.

In addition to the statistics that were observed, we also carried out a Registrant Covid Communications Survey in May 2021. The overall results of this survey will be reported to Council in September 2021 but, on an initial analysis, most registrants have found the communications during the Covid-19 pandemic positive and informative.

We continued to work with staff, Council members, associates and stakeholders to move our face-to-face communications online in a short timeframe via secure video conferencing platforms. Appropriate training and support were provided.

After the initial surge in relation to website hits, we are pleased that our website statistics remain 15% up, year on year, with our 'publication/news' page and 'search the register' remaining the key pages sourced.

**Goal 6. a. We will improve and report on communications effectiveness.**

**Goal 6. b. We will develop a new strategy designed to enhance the public, pharmacy, media and political profile of the organisation.**

The Communications Strategy 2017- 22 was agreed by Council in 2018 and we have continued to deliver on the Strategy's objectives in 2020/21. However, due to the Covid 19 pandemic and the change in working arrangements, external and internal communications were increased and became more focused.

The Communications Strategy 2017-22 provides a framework for all our communications activities and focuses our communication work to ensure it is accessible, responsive and effective.

### **Consultations and Stakeholder engagement work**

In 2020/21, one consultation was carried out on behalf of Council:

- Draft Guidance on the Provision of Services Consultation.

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<sup>32</sup> <https://www.psni.org.uk/publications/newsletters/>

The formal consultation was the culmination of a series of pre-consultation engagements on a more targeted and focused basis and each resulted in a high standard of public and registrant feedback which was used to improve upon the initial policy proposals.

The Provision of Service Guidance was passed by Council at its January 2021 meeting and the Guidance was launched in February 2021.

Council responded to the PSA's public consultation on its approach to the performance review in March 2021.

### **Improving effectiveness**

In May 2021, a Covid Communications Survey was carried out and the outcome of this has been very encouraging with 4 out of 5 respondents indicating that we provided good information which was easily understandable. A full analysis of the survey along with recommendations will be presented to Council in September 2021.

A key component of our Communications Strategy to registrants is direct email - on average 65% of all emails sent are opened.

In addition to the communications sent out, we held several information events, the most successful being on the Future of the Integrated Education and Training for pharmacists, a Zoom event, which saw over 80 participants registering and attending.

### **Goal 6. c. We will develop a 'Reach Out' programme to better engage with the public and pharmacists on regulation (What, Why, When and How).**

The Reach Out programme has been paused due to the Covid-19 pandemic although all Council meetings are now on Zoom and remote attendance from the public and interested parties is welcome.

### **Goal 6. d. We will review our current public consultation protocols**

Work on this goal is scheduled to be completed in 2021.

### **Goal 6. e. We will review and improve external and internal complaints processes**

Work on this goal is scheduled to be completed in 2021.



## 6. Pharmacy Forum NI

### Introduction from Sheelin McKeagney

As Chair of the Pharmacy Forum NI Board, I am proud to present the 2021 Annual Report of the Pharmacy Forum NI.

Undoubtedly, the pandemic has continued to put pressure on pharmacy in Northern Ireland, and indeed the broader healthcare system. But I believe that Covid-19 has been our 'Goliath' - which NI pharmacy has met head-on - and in doing so has gained rightful recognition among policy makers including the NI Health Minister Robin Swann.

Likewise, Pharmacy Forum NI has been punching well above its weight over the past year, having launched two landmark initiatives that should influence the future development of NI pharmacy.

**Pharmacy Futures NI**, commissioned by the Department of Health, aims to address the significant gap in the availability of qualified pharmacy professionals in NI and fill 1,100+ additional roles in the pharmacy sector in NI over the next four years. Initially running November 2020 – June 2021, the campaign was extended by a further three months, testimony to its success.

Marking 1st March, Zero Discrimination Day, the Forum launched a new initiative aimed at advancing, encouraging and supporting **Equality, Diversity & Inclusion** (EDI) in the Northern Ireland pharmacy workplace. The first of our 3-part EDI webinar series held 23rd March, focusing on inclusion and race, was a huge success with over 70 participants including the Chair of the Northern Ireland Assembly Health Committee and the NI Chief Pharmaceutical Officer.

I am proud that this visionary activity is evolving as part of the exciting new era that pharmacy is entering. The pharmacist role has been on a transition from the traditional dispensing of medicines to more patient-facing clinical roles across all areas of practice. In addition, with the new radical reforms to the initial education and training of pharmacists being implemented, anyone now entering the profession has the potential to be prescribing ready upon qualification. At the same time, the adoption of technologies such as automation and telehealth as well as the potential for Hub & Spoke dispensing between pharmacies of different legal entities will also bring challenges and opportunities. All of this is happening within an ever-changing political landscape and within a health and social care service that is, as ever, undergoing a time of significant transformation.

From latest Covid-19 infection trends, it is clear that we are not quite out of the woods, and I want to pay tribute to the outstanding contribution that pharmacy has made and will continue to make to the NI vaccination drive. The **health and wellbeing support service** made for all pharmacy frontline workers, launched last year, has been secured by our Board until September 2021 and I hope it, alongside the Pharmacist Advice and Support Service (PASS), will serve well during this challenging period.

Finally, I also want to pay tribute to the Pharmacy Forum NI Board, the Committees and the Special Interest Groups, without whose expertise, drive and commitment, none of our work could be achieved. The Forum has a small effective team of staff who deliver far beyond expectation. I would like to note my sincerest thanks to them all for their efforts, often going over and beyond on behalf of the profession. Pharmacy Forum NI is a key stakeholder providing professional leadership close to the changes impacting the profession and the environment in which pharmacists work. It's my goal as Chair to ensure we continue to shape a future that ensures pharmacists remain a strong and valued component of patient-centred care in Northern Ireland.



**Sheelin McKeagney, Chair of the Pharmacy Forum NI Board**



# Pharmacy Forum NI

## About Us

Pharmacy Forum NI is the professional leadership body for all pharmacists in Northern Ireland, representing all areas of pharmacy practice, including hospital, GP practice and community settings. The Forum represents over 2,800 registered pharmacists and engages with almost 150 pharmacy Foundation Year trainees. We operate as an arm's-length body under the legislative remit of the Pharmaceutical Society NI. Our role is to lead, promote and support the pharmacy profession to deliver improved outcomes for patients. Forum members are pharmacists registered to practise by the Pharmaceutical Society NI. The Pharmacy Forum NI Board consists of elected members, representatives from other pharmacy organisations and those co-opted for their skills and expertise. The Board met five times this year.

**Figure 1 – Pharmacy Forum Board**

<b>Elected Members</b>		
Sheelin McKeagney, Chair	Eamon O'Donnell, Vice Chair	Raymond Anderson
Philip Boyle	Karen Briers	Anne McAlister
Dr Kate McClelland	Glynis McMurtry	
<b>Representative Members</b>		
Suzanne Cassells – Guild of Healthcare Pharmacists	David McCrea – Community Pharmacy NI	
<b>Co-opted Members</b>		
Linden Ashfield	Katie Blair (left post Nov. 2020)	Prof. Kathy Burnett (left post Jun 2021)
Prof Mike Mawhinney (assumed post Jan 2021)	Prof Paul McCarron (assumed post Jan 2021)	
<b>Early Career Pharmacists (non-voting members)</b>		
Lucy Kerr (left post Jan 2021)	Dr Oisin Kavanagh (assumed post Jan 2021)	

## Pharmacy Forum Committees

**Figure 2 – Education and Training Committee**

<b>Members</b>		
Prof. Kathy Burnett, Chair (left post Jun 2020)	Prof. Paul McCarron, Chair (assumed post Jan 2021)	Raymond Anderson
Maura Corry	Lesley Edgar	Dr Glenda Fleming
Prof Lezley-Anne Hanna	Dr Mary-Carmel Kearney	Hilary McKee
Dr Roisin O'Hare	Roberta Tasker	
<b>Early Career Pharmacists (non-voting members)</b>		
Charlotte Hanna (left post Jan 2021)	Emma Boyle (assumed post Jan 2021)	

**Figure 3 – Policy and Practice Committee**

<b>Members</b>		
Eamon O'Donnell, Chair	Sheelin McKeagney	Karen Briers
Catherine Devlin	Anna Fay	Anne McAlister
Leon O'Hagan (left post Jan 2021)	Una O'Farrell (assumed post Jan 2021)	Dr Carole Parsons
Andrew Cheung (assumed post Apr 2021)		
<b>Early Career Pharmacists (non-voting members)</b>		
Patrick Campbell (left post Jan 2021)	Keady Smith (assumed post Jan 2021)	

The Pharmacy Forum NI operates a number of Interest Groups and Short-Life Working Groups which are project-specific and focus on a range of issues.

## Pharmacy Forum Activity Report

The Forum has continued to champion the profession and its fundamental role in delivering high quality, safe and effective patient-centred care in a challenging environment. We remain committed to canvassing and representing the views of Northern Ireland pharmacists on the issues that matter to them and delivering against our **strategic objectives**. They are as follows:

- Improving pharmacy best practice and medicine optimisation
- Ensuring accessibility to high quality, patient centred care
- Promoting the role of pharmacists and assisting them to maximise their career potential
- Ensuring their voices are heard
- Supporting pharmacists and their families in times of need, through the Pharmacists' Advice and Support Service (PASS)

We will remain a responsive and engaged leadership body on behalf of the pharmacy profession. We will continue to articulate the interests of pharmacists at the very highest levels of decision-making and ensure that pharmacy is recognised as an essential, innovative profession which maintains and enhances its reputation for delivering the very highest standards of patient care.

Given pressures on the profession and operational constraints posed by the current pandemic, Pharmacy Forum NI continued our three-year **Corporate Plan (2017-2020)** into 2021. The plan takes an outcomes-based approach focused on objectives which are based on how our work will make a difference to pharmacists, pharmacy, patients and other stakeholders.

Activity is prioritised under **five key work strands**:

1. **Leadership:** locally active, nationally minded and internationally benchmarked: an influential voice and trusted source of information as well as an effective advocate for pharmacists, pharmacy practice and improved outcomes.
2. **Excellence:** recognising and sharing excellence within the profession; highlighting and benchmarking best practice for our stakeholders and the public.
3. **Development:** enabling the development of pharmacists in their practice and empowering them to reach their potential as healthcare professionals.
4. **Technology:** enabling efficiency and improvement in the safety and quality of patient care through supporting the culture change required for the introduction of new technologies
5. **Support:** providing help in times of need, through the Pharmacists Advice and Support Service (PASS), for pharmacists, pre-registration trainees, ex-pharmacists and their dependents.

The Corporate Plan is supported by a work plan which details activity under each of the key work strands and supporting strategies. Progress continues to be monitored by the Forum Board and activity is communicated to members through the Forum website, newsletters and annual report.

The Corporate Plan is available at: [www.pfni.org.uk/wp-content/uploads/2019/03/PFNI-Corporate-Strategy.pdf](http://www.pfni.org.uk/wp-content/uploads/2019/03/PFNI-Corporate-Strategy.pdf)

## Leadership

### ***Board Elections 2021***

This year was an election year for the Forum and saw four Board members retire by rotation. Following the election launched in May, we welcome four newly elected Board members, who will be formally constituted at the September 2021 Board meeting, and they are as follows: -

- Philip Boyle
- Andrew Cheung
- Neill Elliott
- Dr Oisin Kavanagh

The elected members of the Board are Trustees of three charitable trust funds:

- Pharmacists' Advice and Support Service (PASS) - CCNI number: 101811
- C.W. Young Charitable Trust - CCNI number: 107833
- Ronnie McMullan Charitable Trust - CCNI number: 102801

Two of the charitable Trust funds have independently examined Trustee reports and Charity accounts registered with The Charity Commission for Northern Ireland (CCNI) on an annual basis.

The most recently independently examined Trustee reports and charity accounts are available from the website of The Charity Commission for Northern Ireland:

- PASS
  - Trustee Annual Report and Independent Examiners Report [0000101811\\_20200531\\_TAR.pdf](http://0000101811_20200531_TAR.pdf) ([charitycommission.gov.uk](http://charitycommission.gov.uk))
  - Charity Accounts: [https://apps.charitycommission.gov.uk/ccni\\_ar\\_attachments/0000101811\\_20200531\\_CA.pdf](https://apps.charitycommission.gov.uk/ccni_ar_attachments/0000101811_20200531_CA.pdf)
- Ronnie McMullan Charitable Trust
  - Trustee Annual Report and Independent Examiners Report [https://apps.charitycommission.gov.uk/ccni\\_ar\\_attachments/0000102801\\_20200531\\_AIER.pdf](https://apps.charitycommission.gov.uk/ccni_ar_attachments/0000102801_20200531_AIER.pdf)
  - Charity Accounts

In February 2021 C.W. Young Charitable Trust completed registration with the Charity Commission NI; all three charities are fully compliant with CCNI reporting requirements. However, as the governance and regulatory compliance costs in relation to the Ronnie McMullan Charitable Trust are becoming disproportionate to the cost of delivering its charitable objectives, Trustees are considering the options for the future delivery of its charitable purpose in June 2021.

### ***Covid-19 – safeguarding the pharmacy team’s health & wellbeing***

This year, we secured funding from the Health and Social Care Board for a further six months of the Pharmacy Team’s Health & Wellbeing Support Service. This enables our members to support their teams by providing access to and promoting a 24/7 service for all members of the pharmacy team including pharmacy technicians, dispensers, healthcare assistants and anyone providing any other type of pharmacy support role. The support service is operating between April and September 2021.

### ***Pharmacy Futures NI – attracting, recruiting and retaining pharmacy colleagues***

The DoH-funded Pharmacy Futures NI search and recruitment campaign was launched in November 2020.

**Phase 1 (Nov 2020 – Mar 2021):** targeting qualified pharmacists (both from NI and not from NI) living away; existing NI pharmacists, those who are off the Register; students in their pre-registration year. Key activities included:

- A. A performance managed digital campaign encouraging GB/ROI pharmacists to NI. **PR activity reached a combined viewership of over 0.5 million** and where the majority of digital marketing results performed significantly above average:
  - over **3.7 million impressions** across the UK and ROI
  - over **30,000+ video** views at 75% length watched or more
  - almost **2,500 site visits** during this campaign, 2,000 of which are unique visitors from the UK and Ireland
- B. Establishment of an online professional network of NI pharmacists on LinkedIn
- C. Identification and assignment of 30+ Pharmacy Futures NI Champions as ambassadors for the profession
- D. Press outreach to regional, industry and local media titles, with an estimated combined readership viewing totals well over 500,000. Publications, broadcasters and digital platforms included:

- The Irish News
- The Belfast Telegraph
- Downtown Radio
- Cool FM
- Pharmacy Business
- Pharmafield
- Chemist + Druggist
- Pharmacy in Focus
- Pharmacy Magazine
- Business Eye
- Business First
- Sync NI
- Love Belfast
- Neighbourhood Retailer

- E. Development of a campaign website and digital assets: the campaign has a contemporary, dynamic and modern approach and consists of a series of **short videos** for promotion across all social media channels. Central to the activity has been the creation of a **website** that will provide a ‘one-stop-shop’ with information about the range of opportunities available in Northern Ireland including links to current vacancies.

**Phase 2 (Apr – Jun 2021):** targeting over 80 post-primary schools across Northern Ireland. Main activity included the production of a virtual NI pharmacy careers showcase event and school resources attracting NI post-primary schools and encouraging students to make pharmacy their career of choice. The video was promoted on Twitter and earned over 17,600 impressions. The video earned over 1,500 views on YouTube. See: [Pharmacy Futures NI Career Showcase – launched 19th May 2021](#)

### ***Collaborating with others to promote patient safety and workforce development***

Forum has continued to be ‘**locally active and nationally minded**’ by contributing to policymaking processes, consulting and working collaboratively with the Department of Health NI and other key stakeholders across NI and GB including DHSC (London), RPS, GPhC, HSCB and PSNI on key issues such as:

- Medication safety and optimisation
- Implementation of the Pharmacy Workforce Review
- Reform of the initial education and training of pharmacists
- Development of the National Foundation Pharmacist Curriculum
- Defining and recognising levels of post-graduate practice
- Regional workforce wellbeing (multi-stakeholder)

- New models of prescribing

These issues will have far-reaching implications for the future of the profession and provide the key drivers for radical transformation both now and in the years ahead.

***Influencing decision-makers through policy development and advocating on behalf of the profession***

In 2020/21, the Forum undertook a range of policy advocacy work and responded to **consultations**, presenting the views of pharmacists on key issues impacting the profession. This work included:

- DoH Surge Planning Strategic Framework – September 2020
- DHSC Changes to Human Medicine Regulations to support the rollout of Covid-19 vaccines – September 2020
- PSNI Draft Guidance on the Provision of Services – September 2020
- RQIA Review of Serious Adverse Incidents in NI – October 2020
- DoH Temporary Amendments to the Health and Social Care Framework Document – September 2020
- GPhC Managing concerns about pharmacy professionals: Our strategy for change – January 2021
- DoH Substance Use Strategy for Northern Ireland – February 2021
- MHRA public consultation on the proposal to make Hana available from pharmacies – March 2021
- MHRA public consultation on the proposal to make Lovima available from pharmacies – March 2021
- NI Executive Programme for Government draft Outcomes Framework – March 2021
- DoH Draft Mental Health Strategy 2021-2031 – March 2021
- Letter sent to NI Health Minister Robin Swann requesting inclusion of medical intervention and reference to pharmacy in Draft Mental Health Strategy 2021-2031
- RPS Consultation on the competency framework for all prescribers – May 2021

All consultation responses are available at: [www.pfni.org.uk/making-a-difference/policy/responses](http://www.pfni.org.uk/making-a-difference/policy/responses)

In addition to the above-referenced outputs, the Forum has also kept track of the following developments:

- **Hub & Spoke:** by participating in DHSC pre-consultation stakeholder engagement sessions
- **EU exit:** through discussions with the Chief Pharmaceutical Officer regarding changes impacting the profession.
- **DoH Duty of Candour & Being Open consultation:** through peer exchanges as part of an NI health and social care stakeholder network and participating in information sessions

## **Diversity & Inclusion in NI Pharmacy – Creating the right Culture**

Marking 01 March 2021, Zero Discrimination Day, Pharmacy Forum NI launched a new initiative aimed at advancing, encouraging and supporting Equality, Diversity & Inclusion (EDI) in the Northern Ireland pharmacy workplace.

As part of its EDI activity, the Forum is organising throughout 2021 a 3-part EDI webinar series – Diversity & Inclusion in NI Pharmacy – Creating the right Culture. The first of these took place on 23 March on the case for inclusion and handling race with almost 70 participants including the NI Assembly Chair of the Health Committee.

The webinar series is set up to promote a culture of diversity and inclusion within the NI pharmacy profession that aims to cultivate a safe and inclusive workplace environment, keeps us in step with our increasingly diversified workforce and population and supports current and future workforce needs.

## **Excellence**

### ***Celebrating excellence at every level***

The **Rewarding Excellence Event** unfortunately could not be held this year due to pandemic restrictions. However, three Fellows await conferment at the earliest opportunity in the future.

**Undergraduate Gold Medals** were awarded to the student with the overall highest mark in the final year of their MPharm in Northern Ireland's two Schools of Pharmacy.

The recipient of this year's **Ronnie McMullan Charitable Trust Award** for the top mark in the Pharmaceutical Society NI's Pre-Registration examination will join Forum Board representatives at the 10<sup>th</sup> All Ireland Pharmacy Conference in Autumn 2021.

### ***Collaborating to set standards***

In January, NIPEC and Pharmacy Forum NI convened a multidisciplinary task and finish group from across NI to complete a review of the RPS/RCN co-produced Guidance on the Administration of Medications in Healthcare Settings (2019). The review process amended the references where applicable and reflected current NI legislation in the guidance; this work followed on from Forum endorsement of the guidance last year. Next year, we plan to continue collaboration with RPS/RCN colleagues to ensure the guidance remains enabling for the New Models of Prescribing work in Northern Ireland

In the second half of this reporting period, we participated in the review of the RPS Competency Framework for All Prescribers which we will endorse, when published in September 2021, as the national standard for independent prescribers and all other non-medical prescribers.



## Development

### ***Making Continuing Professional Development meaningful***

The Forum continues to deliver **online resources and a one-to-one service** where peer facilitators can support members with their portfolio submission. We delivered five one-to-one sessions across the year to support those who did not meet standard on first submission and those who wanted to update their portfolio presentation style.

Changes to the current PSNI CPD framework in June 2021 will see revision of the current CPD support and facilitation resources for our members in 2021-22.

### ***Preparing pre-registration students for exam success***

Calculations training for the 2020/21 pre-registration students to prepare for their registration assessment was provided on a virtual online platform again this period due to Covid-19 restrictions. Our expert facilitators provided advice and support to 55 registered students participating in the 3-step calculations programme of pre-coursework, filmed webinars and zoom tutorials. Of those students who provided feedback, 87% said the course was 'excellent' or 'very good' and 100% would recommend the course.

### ***Cultivating the next generation of leaders***

In March 2021, we partnered with Marcomm Training to deliver two workshops, entitled '**Preparation of Pharmacists for Public Appointment**', designed to build the confidence and critical competency interview skills and techniques required to ensure success at interviews using a public appointment process, or equivalent. The Forum facilitated these two fully booked workshops for over 40 participants to support our strategy to develop future leaders and ensure pharmacists maximise their recruitment opportunities. 98% of attendees rated the event good or excellent overall.

Pharmacy Forum NI continued with its programme to develop the leaders of tomorrow by recruiting and appointing **three apprentice members to our Board and committees**. The apprentices are early career pharmacists (<5 years qualified) who complete a year-long programme commencing in January each year.

### ***Promoting and advancing pharmacy through Trust Funds***

**C.W. Young Charitable Trust:** awarded £6,600 to two research projects, as follows:  
'Designing Support for Assessors in Pharmacy using a Co-designed Roadmap'  
'Understanding the Value of Community Pharmacy Delivery Services in Northern Ireland'

**Ronnie McMullan Charitable Trust:** no funding was awarded during this reporting period as the All-Ireland Pharmacy Conference occurs every two years. We plan to fund attendance at the 10<sup>th</sup> All Ireland Pharmacy Conference which is planned for autumn 2021.

## **Technology**

The Forum continued to make optimum use of new technologies to communicate and interact with our constituents and stakeholders.

### ***Keeping the Forum website updated and relevant***

We continued to update the website, through the regular publication of relevant news, featuring multimedia elements like photos, graphics and creating an **Equality, Diversity & Inclusion Hub** on the homepage.

### ***Forging and maintaining connections through our monthly electronic newsletter***

We continued publication of the Forum newsletter on a monthly basis in order to periodically communicate with and to build brand recognition among our network of nearly 3,000 contacts. News items cover the Forum's latest activity, developments affecting the profession and relevant stakeholder news. The newsletter is receiving on average a 40% open rate which is well above the 27% industry average.

During 2020/21, the Forum issued 11 newsletters to all pharmacists and pre-registration year students. We also issued almost 15 special bulletins during the same period including redistributing communications on behalf of the Chief Pharmaceutical Officer and Belfast Trust.

### ***Twitter – widening audience reach through real-time communication***

The Forum uses Twitter as an essential feed of real-time information, allowing us to quickly disseminate bite-sized comment to a steadily growing audience. The Forum's Twitter follower base has been steadily increasing and, as of 31 May 2021, approximately 1,300 followers were registered.

Our largest Twitter interaction was recorded in May 2021 – helped by the paid digital campaign supporting Pharmacy Futures NI - with the announcement of the careers in pharmacy showcase event which earned approximately **59,600 impressions**.

### ***Zoom video conferencing***

In the absence of in-person meetings due to Covid-19, Zoom conferencing continued to be used to facilitate Board and Committee meetings as well as to deliver pre-registration activities including calculations training and a special meeting with pharmacy leaders.

Forum staff continued with homeworking arrangements and have also been collaborating effectively through daily zoom conferencing

## Support

The Pharmacists Advice and Support Service (PASS) exists to help pharmacists, former pharmacists and pre-registration students and their families (spouse/civil partner, children and dependents) in times of need. The range of services are free and confidential. PASS is a registered charity with the Charities Commission NI and is a registered charity, in accordance with the Pharmacy (NI) Order 1976.

Some of the services offered to PASS members



PASS is a free and confidential service

During 2020/21, PASS continued its work across a range of functions including providing **grants in excess of £1,600** and the provision of **45 counselling sessions** (telephone and online due to Covid-19). Ten new service users availed of the standard Inspire counselling, of which three individuals were referred for specialist counselling outside the provision of the existing assistance programme. Areas that are being dealt with include coping with stress and anxiety as a result of Covid-19 pandemic, bereavement, couples counselling and the need for high intensity CBT treatment. In addition, PASS proactively helped in the relief of financial distress with provision of budgeting and debt advice in parallel; the trend continued of younger pharmacists accessing the support service.

**Inspire Support Hub**, launched last year, saw seven new service users sign-up across the 2020/21 period to proactively access a wide range of information and resources online tailored specifically to help care for individual wellbeing needs.

The highlight of PASS outreach activity was held in February 2021 through the UCA network during which a presentation was delivered to pre-registration students to raise awareness of PASS services and benefits. PASS also had a visible presence at the first of a 3-part webinar series on Equality, Diversity & Inclusion in March 2021 and will continue to partner with the working group for the rest of the series to outreach to those affected by the issues discussed.

During the period, PASS developed a standalone **Risk Register** to review and monitor all risks including the Covid-19 pandemic and potential impacts for the charitable fund. A **Safeguarding Policy** was also developed and implemented in November and further training will be completed by all Trustees during 2021 when providers resume training.

We would like to extend our thanks, on behalf of those who have benefitted from PASS services, to everyone who already donates. As a charity, it is vital that we can continue to offer a range of services and the financial support received from pharmacists ensures that we can continue to do so. We urge you to please consider donating. You can do so online at: [www.pfni.org.uk/pass/donate](http://www.pfni.org.uk/pass/donate)

## **7. Financial Overview**

**for the year ended 31 May 2021**

# Financial Overview for the year ended 31 May 2021

<b>Contents Summary</b>	<b>Pages</b>
Chair of Resources foreword	53
Financial Overview, Head of Business Operations	54
Council, Executive and Professional Advisors	57
Statement of responsibilities of the Council	58
Independent Auditor's Report to the Council of the Pharmaceutical Society of Northern Ireland	59
Statement of Comprehensive Income	62
Balance Sheet	63
Cash Flow Statement	64
Statement of Changes in Equity	65
Notes to the financial statements	

# Financial Overview for the year ended 31 May 2021

Foreword by Mark McCrudden, Chair of Finance & Performance Committee (formerly Resources Committee)

Note that, although the registration year 2020/21 was shortened to 9 months (01 September 2020 to 31 May 2021 and the registration year 2019/2020 was extended to 31 August 2020, the financial year has been maintained as 01 June 2020 to 31 May 2021 with comparison 01 June 2019 to 31 May 2020 to facilitate year-on-year comparisons.

## Review of Business Activities

During 2020/2021, the Pharmaceutical Society NI has again managed to achieve the important goal of maintaining expenditure within the existing fee structure. This has been achieved with only one fee increase since 2009 and through a period of considerable financial and legislative uncertainty. The planned use of financial reserves for specific development projects has again been delayed by legislative issues because the majority of our planned projects flow from changes to the legal framework which have been affected by Brexit and the Covid-19 pandemic.

Council approved a three-year Financial Strategy in 2018-19 to ensure financial viability and to support development through effective operation of Pharmaceutical Society NI finances. The Financial Strategy supports the development of operational systems to improve the effectiveness of financial management, control costs and allow timely response to budget variations, thereby minimising the fee burden on registrants.

## Financial Strategy Mission

*To support & lead activities which improve effectiveness, reduce costs and minimise the burden on registrants.*

*To ensure the provision of timely, accurate and relevant financial information to allow decision making by SMT & Council.*

*To ensure there are in place systems and processes to monitor legal & FTP pipeline costs and strategies to deal with costs arising.*

*To have in place processes to ensure the proper management of the investment portfolio.*

**Mark McCrudden**

**Chair of Finance & Performance**

## Financial Overview by Joan Duffy, Head of Business Operations

### Income

In 2020/21, the Pharmaceutical Society NI's total income decreased by £21k compared to the previous financial year to £1,344k (2019/20: £1,365k). The variance is made up of an increase in retention fees £41k offset by a reduction in registration £23k, recovery of costs £24k, dividends and interest £10k, £4k relating to tutor course, and examination income.

Our main source of income is derived from the renewal fees of pharmacists and pharmacies. Registration fees are derived from pre-registration students, new registrants from the pre-registration programme, those joining from another register, re-registration and EEA applicants.

These key sources of income make up 91% (2020: 88%) of our total income.

Key Sources of Income	2020/21	2019/20
	£'000	£'000
Retention Fees	1,038	997
Premises License Fees	89	87
Registration Fees	99	122
Total	1,226	1,206

There has been a significant increase of £40k in retention income compared to the previous year. This was in line with budget expectations and we have seen a year-on-year increase in those remaining on the Register. Registration fees decreased by £23k to £99k (2020: £122k). Although pre-registration applicants have remained steady, there has been a fall in the numbers of new registrants from the pre-registration programme, pharmacists joining from another register and re-registration applicants.

The Department of Health, working with the Pharmacy Forum, supplied funding of £49k (2020: £49k) to extend the "Attract, Recruit, Retain" project aimed at pharmacists in Northern Ireland. This project will be cost neutral to the Pharmaceutical Society NI. Income also includes £3k (2020: £27k) which relates to the recovery of costs from Fitness to Practise cases.



In support of, and as a reaction to, changing healthcare requirements during the Covid-19 pandemic, 262 pharmacists (2020: 265) were registered on our Covid-19 Temporary Register without fees being charged.

## **Expenditure**

In 2020/21, our total expenditure was £8k lower compared with the previous financial year to £1,273k (2019/20: £1,281k). There were increases in certain cost categories such as an increase in salary and related costs £25k, Depreciation £11k, Pre-registration administration £6k, Subscription £5k, Pharmacy Forum £4k and £4k relating to a project with external funding noted in income. This is offset by a reduction in events and travel £24k, recruitment £17k, computer expenses £10k, facilities expenditure £6k and £6k relating to marginal variances over several headings .

Staff & related costs grew from £685k to £706k. Whilst this represented an increase of £21k on the previous year, it was broadly in line with budget expectations. This increase in staff costs, is mainly due to costs incurred on temporary staff needed to cover maternity leave and to annual adjustments to core staff salaries.

Statutory Committee expenses have remained steady at £137k. This substantial cost reflects the increased numbers of cases brought by the Pharmaceutical Society NI. While the Pharmaceutical Society NI continues to focus on reducing costs and timelines associated with each case, based on our current predictions, caseload costs are expected to increase again in the coming year.

There has been a reduction of £6k in costs relating to facilities and office expenses. This has been achieved partly through increased efficiencies and due to the continued closure of the office as a consequence of Covid-19. Governance expenses have remained steady when compared to the previous year. IT and computing costs have decreased by £10k, as one-off costs associated with “Cloud” migration of the Pharmaceutical Society NI’s IT services to and the enablement of a viable home working solution for all staff during the current pandemic were incurred in the prior year.

There has been an £17k decrease in recruitment related to the recruitment of the Registrar in the prior year. As detailed in the Statement of Comprehensive Income report, the remaining variance on the previous year’s expenditure relates to the following expenditure lines: pension costs, legal and professional, communications, subscriptions, depreciation, loss on disposal and Pharmacy Forum expenses.

Historically, the largest expenditure elements are staff and related costs, Statutory Committee expenses, facilities expenditure, office expenses, computer expenses and governance expenses. Together, these represent 81% of the total operational expenditure at £1,036k in 2020/21; this compares to 80% in 2019/20.

## **Balance Sheet**

Due to the overall surplus in 2020/21, the reserves have risen by £242k.

The decision to revert to issuing of retention notices in April 2021 for the year ending 31 May 2022 (prior year retention notices were issued in August 2020) has led to significant increases in Debtors, Cash and Creditors balances compared to the prior year, although with no overall effect on working capital or net reserves due to the implementation of our Reserves Policy to deal with the unexpected delays.

Though Covid-19 has caused considerable upheaval for our registrants and indeed for our staff, after a review of budgets and forecasts, as well as the year end position, we do not foresee that it will have a negative impact on our income or expenditure for the foreseeable future. There has been a substantial increase in value of the investment portfolio during the year, and this is the major constituent of the increased level of reserves held.

The investment portfolio valuation at year end increased by £237k due to additional investment during the year and the general upward trend of publicly traded investments. The year end valuation exceeded the actual original cost of the portfolio. The prudent reserves policy over the last number of years has meant that the Pharmaceutical Society NI had the appropriate level of reserves and financial resources to cope with the Covid-19 disruption internally, this situation is being continually monitored.

**Joan Duffy**  
**Head of Business Operations**

## **Council, Executive and Professional Advisors**

### President

Dr Jim Livingstone

### Council

Full list of council members referenced on page 27

### Chair of Finance & Performance

Mark McCrudden

### Chief Executive

Trevor Patterson

### Auditors

Moore (N.I.) LLP  
Donegall House  
7 Donegall Square North  
Belfast  
BT1 5GB

### Principle Bankers

Bank of Ireland  
1 Donegall Square South  
Belfast  
BT1 5LR

### Legal Advisors

Cleaver Fulton Rankin  
50 Bedford Street  
Belfast  
BT2 7FW

## Statement of responsibilities of the Council

The Council is responsible for preparing the Annual Report and the financial statements in accordance with applicable law and regulations.

Article 4C of the Pharmacy (Northern Ireland) Order 1976 requires the Council to prepare financial statements for each financial year in such form as the Department of Health (the 'Department') may determine. The Council has elected to prepare the financial statements in accordance with the basis of preparation and accounting policies set out in note 1 which it has determined are appropriate to the Society's circumstances having regard to current requirements of accounting standards issued by the UK Financial Reporting Council (UK Generally Accepted Accounting Practice), including FRS 102 *The Financial Reporting Standard Applicable in the UK and Ireland*. In addition, the Council has reported information in accordance with the Department's determination of 15<sup>th</sup> May 2020.

In preparing these financial statements, the Council has:

- selected suitable accounting policies and then applied them consistently.
- made judgements and estimates that are reasonable and prudent; and
- prepared the financial statements on the going concern basis unless it is inappropriate to presume that the Society will continue in business.

The Council is responsible for keeping proper accounting records that are sufficient to show and explain the Society's transactions.

The Council is also responsible for preparing the Annual Report in accordance with Article 4D of the Pharmacy (Northern Ireland) Order 1976.

The Council has general responsibility for taking such steps as are reasonably open to them to safeguard the assets of the Society and to prevent and detect fraud and other irregularities.

The Council is responsible for the maintenance and integrity of the corporate and financial information included on the Society's website. Legislation in the UK governing the preparation and dissemination of financial statements may differ from legislation in other jurisdictions. By Order of the Council.



JIM LIVINGSTONE  
PRESIDENT



TREVOR PATTERSON  
CHIEF EXECUTIVE

**16<sup>th</sup> September 2021**

# **Independent Auditor's Report to the Members of the Pharmaceutical Society Northern Ireland**

## **Opinion**

We have audited the accounts of Pharmaceutical Society of Northern Ireland for the year ended 31 May 2021 which comprise the Statement of Comprehensive Income, the Balance Sheet, the Statement of Cash Flows and the notes to the accounts, including a summary of significant accounting policies set out in note 1.

## **Opinion on Financial Statements**

In our opinion:

- give a true and fair view on the state of the society's affairs as at 31 May 2021 and of its incoming resources and application of resources including its income and expenditure for the year then ended;
- have been properly prepared in accordance with the special purpose basis of preparation and accounting policies set out in note 1 to the financial statements
- have been prepared in accordance with the Pharmacy (Northern Ireland) Order 1976.

## **Basis for opinion**

We conducted our audit in accordance with International Standards on Auditing (UK) (ISAs (UK)) and applicable law. Our responsibilities under those standards are further described in the Auditor's responsibilities for the audit of the accounts section of our report. We are independent of the Society in accordance with the ethical requirements that are relevant to our audit of the accounts in the UK, including the FRC's Ethical Standard, and we have fulfilled our other ethical responsibilities in accordance with these requirements. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

## **Emphasis of matter – special purpose basis of preparation**

We draw attention to note 1 to the financial statements, which describes their basis of preparation. As explained in that note, the financial statements are prepared to assist the Society in complying with the financial reporting requirements of Article 4C of the Pharmacy (Northern Ireland) Order 1976. As a result, the financial statements may not be suitable for another purpose. Our opinion is not modified in respect of this matter.

## **Conclusions relating to going concern**

We have nothing to report in respect of the following matters in relation to which the ISAs (UK) require us to report to you where:

- the Council's use of going concern basis of accounting in the preparation of the accounts is not appropriate; or
- the Council have not disclosed in the accounts any identified material uncertainties that may cast significant doubt about the Society's ability to continue to adopt the going concern basis of accounting for a period of at least twelve months from the date when the accounts are authorised for issue.

## **Other information**

The other information comprises the information included in the annual report, other than the accounts and our auditor's report thereon. The Trustees are responsible for the other information. Our opinion on the accounts does not cover the other information and, except to the extent otherwise explicitly stated in our report, we do not express any form of assurance conclusion thereon.

In connection with our audit of the accounts, our responsibility is to read the other information and, in doing so, consider whether the other information is materially inconsistent with the accounts or our

knowledge obtained in the audit or otherwise appears to be materially misstated. If we identify such material inconsistencies or apparent material misstatements, we are required to determine whether there is a material misstatement in the accounts or a material misstatement of the other information. If, based on the work we have performed, we conclude that there is a material misstatement of this other information, we are required to report that fact.

We have nothing to report in this regard.

### **Matters on which we are required to report by exception**

In the light of the knowledge and understanding of the Council and its environment obtained in the course of the audit, we have not identified material misstatements in the Annual Report.

### **Responsibilities of Council**

As explained more fully in the Statement of Responsibilities, the Council are responsible for the preparation of the accounts and for being satisfied that they give a true and fair view, and for such internal control as the members determine is necessary to enable the preparation of accounts that are free from material misstatement, whether due to fraud or error.

In preparing the accounts, the Council are responsible for assessing the Society's ability to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless the Council either intend to liquidate the Society or to cease operations, or have no realistic alternative but to do so.

### **Auditor's responsibilities for the audit of the financial statements**

Our objectives are to obtain reasonable assurance about whether the accounts as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance but is not a guarantee that an audit conducted in accordance with ISAs (UK) will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of these accounts.

Irregularities, including fraud, are instances of non-compliance with laws and regulations. We design procedures in line with our responsibilities, outlined above, to detect material misstatements in respect of irregularities, including fraud. The extent to which our procedures are capable of detecting irregularities, including fraud, is detailed below.

### **Explanation as to what extent the audit was considered capable of detecting irregularities, including fraud**

The objectives of our audit in respect of fraud, are to identify and assess the risks of material misstatement of the financial statements due to fraud; to obtain sufficient appropriate audit evidence regarding the assessed risks of material misstatement due to fraud, through designing and implementing appropriate responses to those assessed risks; and to respond appropriately to instances of fraud or suspected fraud identified during the audit. However, the primary responsibility for the prevention and detection of fraud rests with both management and those charged with governance of the Society.

Our approach was as follows:

- We obtained an understanding of the legal and regulatory requirements applicable to the Society and considered that the most significant are the Pharmacy (Northern Ireland) order 1976.
- Enquiry of management, those charged with governance and the entity's solicitors around actual and potential litigation and claims.
- Enquiry of entity staff in compliance functions to identify any instances of any non-compliance with laws and regulations.

- Reviewing financial statement disclosures and testing to supporting documentation to assess compliance with applicable laws and regulations.
- Auditing the risk of management override of controls, including through testing journal entries and other adjustments for appropriateness, and evaluating the business rationale of significant transactions outside the normal course of business.

As part of an audit in accordance with ISAs (UK) we exercise professional judgement and maintain professional scepticism throughout the audit. We also:

- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, design and perform audit procedures responsive to those risks, and obtain audit evidence that is sufficient and appropriate to provide a basis for our opinion. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purposes of expressing an opinion on the effectiveness of the society's internal control.
- Evaluate the appropriateness of accounting policies used and the reasonableness of accounting estimates and related disclosures made by the Council
- Conclude on the appropriateness of the Council's use of the going concern basis of accounting and, based on the audit evidence obtained, whether a material uncertainty exists related to events or conditions that may cast significant doubt on the Society's ability to continue as a going concern. If we conclude that a material uncertainty exists, we are required to draw attention in our auditor's report to the related disclosures in the financial statements or, if such disclosures are inadequate, to modify our opinion. Our conclusions are based on the audit evidence obtained up to the date of our auditor's report. However, future events or conditions may cause the Society to cease to continue as a going concern.
- Evaluate the overall presentation, structure and content of the financial statements, including the disclosures, and whether the financial statements represent the underlying transactions and events in a manner that achieves fair presentation.

A further description of our responsibilities for the audit of the accounts is located on the Financial Reporting Council's website at: <http://www.frc.org.uk/auditorsresponsibilities>. This description forms part of our auditor's report.

We communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit and significant findings, including any significant deficiencies in internal control that we identify during our audit.

### **Use of our report**

This report is made solely to the Society's Council, as a body, in accordance with Article 4C of the Pharmacy (Northern Ireland) Order 1976. Our audit work has been undertaken so that we might state to the Society's Council those matters we are required to state to them in an auditors' report and for no other purpose. To the fullest extent permitted by law, we do not accept or assume responsibility to anyone other than the society and its members as a body, for our audit work, for this report, or for the opinions we have formed.

*R. J. Peters Gallagher*

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**Dr. R I Peters Gallagher OBE FCA (Senior Statutory Auditor)**  
 for and on behalf of Moore (N.I.) LLP, Statutory Auditor  
 Chartered Accountants

Dated:  
 Donegall House  
 7 Donegall Square North  
 Belfast BT1 5GB

# The Pharmaceutical Society of Northern Ireland

## Statement of Comprehensive Income for the year ended 31 May 2021

	Notes	2021 £	2020 £
<b>INCOME</b>			
Retention Fees		1,037,586	996,592
Licences		88,795	87,439
Registration Fees		98,917	122,442
Tutors Course & Calculations Fees		15,829	17,848
Interest		636	5,433
Miscellaneous		4,310	6,178
Examinations		24,708	27,579
Dividends		20,892	25,791
Cost Recovery – Fitness to Practise		2,630	26,910
Dept of Health – Attract, Recruit, Retain funding		49,940	49,218
		<u>1,344,243</u>	<u>1,365,430</u>
<b>EXPENDITURE</b>			
Computer Expenses		37,502	47,007
Salaries and National & Medical Insurance		705,720	685,219
Pension Costs - Staff		31,308	26,097
Adjustment to legacy pension obligation		2,972	4,082
Office Expenses		47,365	47,326
Events, Travel & Subsistence		3,974	27,742
Legal, Professional & Other Consultancy Expenses		69,105	72,357
Statutory Committee Expenses		137,359	137,176
Pharmacy Forum Events, CPA subs & Discretionary Expenses		15,422	11,864
Pharmacy Forum - Attract, Recruit, Retain Expenditure		47,189	43,290
Subscriptions		14,128	9,912
Facilities Expenditure		40,213	46,567
Depreciation	2	23,986	13,048
Recruitment		2,400	19,534
Communications		-	1,202
CPD Process		13,578	13,253
Pre-registration Process		19,521	13,213
Gain/(loss) on disposal of Investment Assets		(731)	(1,757)
Governance Expenses		36,426	38,330
Project Expenses		25,191	25,354
		<u>1,272,628</u>	<u>1,280,816</u>
<b>OPERATING SURPLUS</b>		<b>71,615</b>	<b>84,614</b>
Gain/(Loss) on revaluation of investments	5	213,782	(81,154)
<b>SURPLUS BEFORE TAX</b>		<b>285,397</b>	<b>3,460</b>
Taxation	3	(44,857)	12,468
<b>SURPLUS FOR THE YEAR</b>		<b>240,540</b>	<b>15,928</b>
<b>OTHER COMPREHENSIVE INCOME</b>		<b>1,030</b>	<b>1,030</b>
<b>TOTAL COMPREHENSIVE INCOME FOR THE YEAR</b>		<b>241,570</b>	<b>16,958</b>

The notes on pages 66-75 form part of these financial statements.



# The Pharmaceutical Society of Northern Ireland

## Balance Sheet for year ended 31 May 2021

	Notes	2021 £	2020 £
<b>FIXED ASSETS</b>			
Tangible Assets	4	55,774	33,350
Investments	5	1,115,523	878,189
		<u>1,171,297</u>	<u>911,539</u>
<b>CURRENT ASSETS</b>			
Debtors	6	492,015	58,806
Bank deposits		201,503	501,002
Current Account		1,190,646	179,894
Smith & Williamson – Deposit Account		85,477	95,936
		<u>1,969,641</u>	<u>835,638</u>
<b>CURRENT LIABILITIES DUE WITHIN ONE YEAR</b>			
Creditors	7	(1,297,375)	(183,206)
		<u>672,266</u>	<u>652,432</u>
<b>NET CURRENT ASSETS</b>			
		<u>1,843,563</u>	<u>1,563,971</u>
<b>TOTAL ASSETS LESS CURRENT LIABILITIES</b>			
<b>PROVISIONS</b>			
Deferred tax liability	8	(70,068)	(26,452)
Pension obligations	9	(76,415)	(80,979)
		<u>1,697,080</u>	<u>1,456,540</u>
<b>NET ASSETS</b>			
<b>SOURCE OF FUNDS</b>			
Income and expenditure account		1,692,915	1,451,345
Premises renovation grant		4,165	5,195
		<u>1,697,080</u>	<u>1,456,540</u>
<b>TOTAL FUNDS</b>			

The financial statements were authorised for issue on 16<sup>th</sup> September 2021 and signed on behalf of the Council by:  
**JIM LIVINGSTONE (PRESIDENT)**



**TREVOR PATTERSON (CHIEF EXECUTIVE)**



The notes on pages 66-75 form part of these financial statements.

# The Pharmaceutical Society of Northern Ireland

## Cash Flow Statement for year ended 31 May 2021

<i>Note</i>	<b>2021</b> £	2020 £
<b>Cash flows from operating activities</b>		
Surplus for the year	240,540	15,928
<i>Adjustments for:</i>		
Depreciation	23,986	13,048
Interest receivable	(636)	(5,433)
Dividends received	(20,892)	(25,791)
Loss/(Gain) on revaluation of investments	(213,782)	79,173
Loss on disposal of fixed assets	(731)	152
Taxation	44,857	(12,468)
	<b>73,342</b>	64,610
Increase in trade and other debtors	(433,209)	292,778
Increase in trade and other creditors	1,114,169	(920,102)
Decrease in provisions	(4,564)	(3,311)
	<b>749,738</b>	(566,025)
Tax paid	(1,241)	(992)
<b>Net cash from operating activities</b>	<b>748,497</b>	(567,017)
<b>Cash flows from investing activities</b>		
Acquisition of tangible fixed assets	(46,410)	(12,773)
Interest received	636	5,433
Dividends received	20,892	25,791
Purchase of investments	(166,287)	(75,874)
Proceeds from sale of investments	143,466	3,531
<b>Net cash from investing activities</b>	<b>(47,703)</b>	(53,892)
<b>Cash flows from financing activities</b>		
Cash withdrawn/(placed) from deposit	299,499	375
<b>Net cash from financing activities</b>	<b>299,499</b>	375
Net increase in cash and cash equivalents	1,000,293	(620,534)
Cash and cash equivalents at 1 June	275,830	896,364
<b>Cash and cash equivalents at 31 May</b>	<b>1,276,123</b>	275,830

The notes on pages 66-75 form part of these financial statements.

# The Pharmaceutical Society of Northern Ireland

## Statement of changes in equity for the year ended 31 May 2021

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	Income and expenditure account	Premises renovation grant	Total funds £
	£	£	
Balance at 1 June 2019	1,434,387	6,225	1,440,612
<i>Total comprehensive income for the year</i>			
Profit or loss	15,928	-	15,928
<b>Other comprehensive income</b>			
Premises grant amortisation	1,030	(1,030)	-
	<hr/>	<hr/>	<hr/>
Total comprehensive income for the year	16,958	(1,030)	15,928
	<hr/>	<hr/>	<hr/>
Balance at 31 May 2020	1,451,345	5,195	1,456,540
	<hr/> <hr/>	<hr/> <hr/>	<hr/> <hr/>
	Income and expenditure account	Premises renovation grant	Total funds £
	£	£	
Balance at 1 June 2020	1,451,345	5,195	1,456,540
<i>Total comprehensive income for the year</i>			
Profit or loss	240,540	-	240,540
<b>Other comprehensive income</b>			
Premises grant amortisation	1,030	(1,030)	-
	<hr/>	<hr/>	<hr/>
Total comprehensive income for the year	241,570	(1,030)	240,540
	<hr/>	<hr/>	<hr/>
<b>Balance at 31 May 2021</b>	1,692,915	4,165	1,697,080
	<hr/> <hr/>	<hr/> <hr/>	<hr/> <hr/>

The notes on pages 66-75 form part of these financial statements

# Notes to the Financial Statements for the year ended 31 May 2021

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## 1. Principal Accounting Policies

The Pharmaceutical Society of Northern Ireland (the “Society”) is a statutory regulatory body for pharmacists who wish to work in Northern Ireland.

### ***Basis of preparation***

The financial statements have been prepared as required by Article 4C of the Pharmacy (Northern Ireland) Order 1976 and in accordance with the accounting policies set out in this note, which have been determined by the Council to be appropriate to the Society’s circumstances having regard to the recognition and measurement criteria of current accounting standards issued by the UK Financial Reporting Council (UK Generally Accepted Accounting Practice), including FRS 102 The Financial Reporting Standard applicable in the UK and Ireland (‘FRS102’), with the exception of:

- Payments to former employees under which the obligation has been estimated in accordance with FRS102.21 Provisions and Contingencies, rather than FRS102.28 Employee Benefits as a defined benefit obligation; and
- The Society has prepared financial statements which present information about the Society only and do not incorporate financial information relating to certain funds (Pharmacists Advice and Support Service, the CW Young Scholarship Fund and the Ronnie McMullan Trust Fund) whose operations are directed by the Society. The Council considers that it is appropriate not to incorporate this information into the Society’s financial statements as required by FRS102 and details of the funds are provided in the unaudited appendices to the financial statements.

The presentation and functional currency of these financial statements is Sterling.

The accounting policies set out below have, unless otherwise stated, been applied consistently to all periods presented in these financial statements.

Management have assessed that there are no estimates or judgments that have a significant risk of causing a material adjustment to the carrying amounts of assets and liabilities recognised in the financial statements.

### ***Measurement convention***

The financial statements are prepared on the historical cost basis except investments which are measured at their fair value.

### ***Going concern***

The Pharmaceutical Society’s activities together with factors affecting future development, performance and position are set out in the Annual Report and Foreword by the Chair of the Finance & Performance Committee (formerly Resources) including the potential impact COVID-19 could have on the financial position. The Pharmaceutical Society NI has satisfactory financial resources and is in a strong net asset position. As a consequence, the Council believes that the Pharmaceutical Society NI is well placed to manage its risks successfully. Accordingly, they continue to adopt the going concern basis in preparing the financial statements.

### ***Financial information relating to funds administrated by the Society***

Certain funds, (Pharmacists Advice and Support Service, the CW Young Scholarship Fund and the Ronnie McMullan Trust Fund) whose operations are directed by the Society, are not incorporated in the financial statements. The financial statements present information about the Society only.

# Notes to the Financial Statements for the year ended 31 May 2021 (continued)

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## 1. Principal Accounting Policies (continued)

### **Revenue**

Turnover represents the invoice value of service and is recognised on provision of the related service. Retention, licences and registration fees are recognised on commencement of the relevant annual registration period. Revenue from examinations is recognised in proportion to the stage of completion of the delivery of this service at the reporting date. The stage of completion is assessed by management. Interest is included in the income and expenditure account on an accruals basis. Dividend income is recognised when the security is declared ex-dividend.

### **Basic financial instruments**

#### *Trade and other debtors/creditors*

Trade and other debtors are recognised initially at transaction price less attributable transaction costs. Trade and other creditors are recognised initially at transaction price plus attributable transaction costs.

#### *Cash and cash equivalents*

Cash and cash equivalents comprise cash balances and call deposits.

### **Equity investments**

Equity investments are recognised initially at fair value which is normally the transaction price (but excludes any transaction costs, where the investment is subsequently measured at fair value through profit and loss). Subsequently, they are measured at fair value through profit or loss, except for those equity investments that are not publicly traded and whose fair value cannot otherwise be measured reliably, which are recognised at cost less impairment until a reliable measure of fair value becomes available.

If a reliable measure of fair value is no longer available, the equity instrument's fair value on the last date the instrument was reliably measurable is treated as the cost of the instrument.

### **Tangible fixed assets and depreciation**

Tangible fixed assets are stated at cost less accumulated depreciation and accumulated impairment losses. Where parts of an item of tangible fixed assets have different useful lives, they are accounted for as separate items of tangible fixed assets.

Depreciation is charged to expenditure on a straight-line basis and reducing balance over the estimated useful lives of each part of an item of tangible assets. Leased assets are depreciated over the shorter of the lease term and their useful lives. The estimated useful lives are as follows:

- Property - 40 years, straight-line
- Furniture and office equipment - 4-7 years, reducing balance
- Computer equipment - 4 years, reducing balance

Depreciation methods, useful lives and residual values are reviewed if there is an indication of a significant change since last annual reporting date in the pattern by which the Society expects to consume an asset's future economic benefits.

# Notes to the Financial Statements for the year ended 31 May 2021 (continued)

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## 1. Principal Accounting Policies (continued)

### *Impairment*

#### *Financial assets (including trade and other debtors)*

A financial asset not carried at fair value through profit or loss is assessed at each reporting date to determine whether there is objective evidence that it is impaired. A financial asset is impaired if objective evidence indicates that a loss event has occurred after the initial recognition of the asset, and that the loss event had a negative effect on the estimated future cash flows of that asset that can be estimated reliably.

An impairment loss in respect of a financial asset measured at amortised cost is calculated as the difference between its carrying amount and the present value of the estimated future cash flows discounted at the asset's original effective interest rate. For financial instruments measured at cost less impairment, an impairment is calculated as the difference between its carrying amount and the best estimate of the amount that the Society would receive for the asset if it were to be sold at the reporting date. Interest on the impaired asset continues to be recognised through the unwinding of the discount. Impairment losses are recognised in profit or loss. When a subsequent event causes the amount of impairment loss to decrease, the decrease in impairment loss is reversed through profit or loss.

### *Pension obligations*

#### *Defined contribution plans*

A defined contribution plan is a post-employment benefit plan under which the Society pays fixed contributions into a separate entity and will have no legal or constructive obligation to pay further amounts. Obligations for contributions to defined contribution pension plans are recognised as an expense in the income and expenditure account in the periods during which services are rendered by employees.

#### *Payments to former employees*

The Society has a commitment to provide annual payments to a former employee. The Society's obligation in respect of this member is calculated by estimating the amounts of future benefit that the member is estimated to receive and is recognised as a liability of the Society.

The liability is measured based on publicly available actuary mortality tables and other relevant assumptions using guidance set out in FRS102.21 Provisions and Contingencies.

### *Provisions*

A provision is recognised in the balance sheet when the entity has a present legal or constructive obligation as a result of a past event, that can be reliably measured, and it is probable that an outflow of economic benefits will be required to settle the obligation. Provisions are recognised at the best estimate of the amount required to settle the obligation at the reporting date.

### *Taxation*

Tax on the profit or loss for the year comprises current and deferred tax. Tax is recognised in the income and expenditure account except to the extent that it relates to items recognised directly in equity or other comprehensive income, in which case it is recognised directly in equity or other comprehensive income.

Current tax is the expected tax payable or receivable on the taxable income or loss for the year, using tax rates enacted or substantively enacted at the balance sheet date, and any adjustment to tax payable in respect of previous years.

# Notes to the Financial Statements for the year ended 31 May 2021 (continued)

## 1. Principal Accounting Policies (continued)

### Taxation (continued)

Deferred tax is provided on timing differences which arise from the inclusion of income and expenses in tax assessments in periods different from those in which they are recognised in the financial statements. The following timing differences are not provided for: differences between accumulated depreciation and tax allowances for the cost of a fixed asset if and when all conditions for retaining the tax allowances have been met to the extent that it is not probable that they will reverse in the foreseeable future.

Deferred tax is not recognised on permanent differences arising because certain types of income or expense are non-taxable or are disallowable for tax or because certain tax charges or allowances are greater or smaller than the corresponding income or expense.

Deferred tax is measured at the tax rate that is expected to apply to the reversal of the related difference, using tax rates enacted or substantively enacted at the balance sheet date.

### Grants

#### Premises Renovation Grant

The premises renovation grant was recorded in reserves on receipt and is amortised into the income and expenditure account at 2.5% per annum in line with the depreciation period on the property.

## 2. Expenses and auditors' remuneration

	2021	2020
	£	£
<i>Operating surplus on operating activities before tax is stated after charging</i>		
Depreciation of tangible assets	23,986	13,048
Auditors Remuneration:		
- Audit of these financial statements	7,800	9,000
	<u>          </u>	<u>          </u>

Employee Costs excluding Council members were constituted as follows:

	2021	2020
	£	£
Wages and Salaries	626,163	610,997
Employer's National Insurance	63,119	56,136
Pension Costs	31,308	26,097
Staff Health Plan	16,438	18,086
	<u>          </u>	<u>          </u>
Total non-Council members employment costs	737,028	711,316
	<u>          </u>	<u>          </u>

Under FRS102, key management personnel are those persons having authority and responsibility for planning, directing and controlling the activities of the entity, directly or indirectly. This includes the Chief Executive, Registrar and senior managers. Numbers of Key Management Personnel who earned over £60,000 Full Time Equivalent (including Pension and Health Contributions) during the year.

## Notes to the Financial Statements for the year ended 31 May 2021 (continued)

### 2. Expenses and auditors' remuneration (continued)

	2021 No.	2020 No.
£60,001 to £70,000	4	4
£70,001 to £80,000	-	-
£80,001 to £90,000	-	-
£90,001 to £100,000	1	1
	<hr/>	<hr/>
Total Number of Key Management Personnel	<b>5</b>	<b>5</b>

Total compensation (including pension contributions & benefits) of regulator key management personnel in the year amounted to £295,827 (2020: £294,552).

Job Title	Full Time Equivalent Pay (Stated in £10k bandings)	Benefits in kind** (to the nearest £100)
Chief Executive	£90,001 - £100,000	£3,700
Registrar	£60,001 - £70,000	-
Head of Public Affairs	£60,001 - £70,000	£1,200
Head of Business Operations	£60,001 - £70,000	£1,000
Pharmacy Forum NI Manager	£60,001 - £70,000*	£800

\* The Pharmacy Forum NI Manager is contracted to work 22.5 hours per week

\*\* Benefits in kind include private healthcare.

The Chief Executive claimed travel expenses totalling £114. All other key management personnel did not claim any expenses during the year. The use of virtual meetings due to Covid-19 best practice has reduced the expense amount claimed during this year.

Remuneration of highest paid Key management person as a multiple of median remuneration:

	2021 £	2020 £
Midpoint of band of highest paid director's total remuneration	<b>95,000</b>	95,000
Median total remuneration	<b>30,000</b>	30,000
Remuneration ratio	<b>1:3</b>	1:3



## Notes to the Financial Statements for the year ended 31 May 2021 (continued)

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### 3. Taxation

*Total tax expense recognised in the statement of comprehensive income*

	<b>2021</b>	<b>2020</b>
	£	£
<i>Current tax</i>		
Current tax on income for the period	<b>1,241</b>	991
Adjustments on respect of prior periods	-	-
	-----	-----
Total current tax	<b>1,241</b>	991
<i>Deferred tax</i>		
Origination and reversal of timing differences	<b>43,616</b>	(13,459)
	-----	-----
Total deferred tax (note 8)	<b>43,616</b>	(13,459)
	-----	-----
Total tax charge/ (credit)	<b>44,857</b>	(12,468)
	=====	=====

## Notes to the Financial Statements for the year ended 31 May 2021 (continued)

### 4. Tangible Assets

	<i>University Street Property</i> £	<i>Furniture and Office Equipment</i> £	<i>Computer Equipment</i> £	<i>Total</i> £
<b>Cost</b>				
At 1 June 2020	87,114	132,927	116,798	336,839
Additions	-	3,977	42,433	46,410
Disposals	-	(9,023)	(51,056)	(60,079)
<b>At 31 May 2021</b>	<b>87,114</b>	<b>127,881</b>	<b>108,175</b>	<b>323,170</b>
<b>Depreciation</b>				
At 1 June 2020	77,548	128,659	97,282	303,489
Charge for year	2,709	2,970	18,307	23,986
Eliminated on Disposal	-	(9,023)	(51,056)	(60,079)
<b>At 31 May 2021</b>	<b>80,257</b>	<b>122,606</b>	<b>64,533</b>	<b>267,396</b>
<b>Written Down Value At 31 May 2021</b>	<b>6,857</b>	<b>5,275</b>	<b>43,642</b>	<b>55,774</b>
At 31 May 2020	9,566	4,268	19,516	33,350

### 5. Investments

	2021 £	2020 £
<b>Fair value</b>		
At beginning of year	878,189	885,019
Additions	166,287	75,874
Disposals	(142,735)	(1,550)
Fair value adjustments	213,782	(81,154)
At end of year	<b>1,115,523</b>	878,189

Investments comprises listed investments which at 31 May 2021 had a market value of £1,115,523 (2020: £878,189).

## Notes to the Financial Statements for the year ended 31 May 2021 (continued)

### 6. Debtors

	2021 £	2020 £
Trade debtors	465,286	24,474
Amounts receivable from related parties	-	1,567
Prepayments and accrued income	26,729	32,765
	<u>492,015</u>	<u>58,806</u>

### 7. Creditors

	2021 £	2020 £
Trade Creditors	113,315	95,656
Accruals	45,128	45,965
Deferred Income	1,121,983	26,747
Taxation and Social Security Costs	16,689	14,737
Corporation tax	260	101
	<u>1,297,375</u>	<u>183,206</u>

### 8. Deferred tax liability

	2021 £	2020 £
Investments	70,068	26,452
	<u>70,068</u>	<u>26,452</u>

The movement during the year comprises a charge of £43,616 (2020: debit of £13,459) which is recognised in gain or deficit for the year.

## Notes to the Financial Statements for the year ended 31 May 2021 (continued)

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### 9. Pension obligations

#### Defined contribution plans

The Society operates a defined contribution plan. Contributions payable by the Society for the year ended 31 May 2021 amounted to £31,308 (2020: £26,097). No contributions were outstanding at year end (2020: nil).

#### Payments to former employees

	2021 £
At beginning of year	80,979
Charge to the income and expenditure account for the year	2,972
Benefits paid	(7,536)
	<hr/>
At end of year	76,415
	<hr/> <hr/>

The provision relates to the Pharmaceutical Society's obligation to make annual payments to a former employee and in his death, 50% of the annual payment to his spouse.

### 10. Commitments

The Society had no contractual commitments contracted for but not provided in the financial statements (2020: nil).

## Notes to the Financial Statements for the year ended 31 May 2021 (continued)

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### 11. Contingent liabilities

During the 2014/15 review of fees, which was the subject of public consultation, the Department of Health Social Services and Public Safety (DHSSPS) was requested, pursuant to Articles 5 and 25A of The Pharmacy (1976 Order) (Amendment) Order (Northern Ireland) 2012 as amended, to approve amendments to some of the fees levied by the Society. During this approval process, it became clear that, in the last round of substantive amendments to fees in 2009, some of the changes we had requested at that time had for some reason not in fact been incorporated in new Regulations as expected.

The Council initiated an immediate and comprehensive review of fees charged and their historic legislative basis. As a result, it became clear that a number of anomalies had arisen over a period of twenty years such that some registrants and prospective registrants were charged fees for services provided on the basis of a fee structure that was not wholly contained in Regulations.

Council has taken legal advice concerning any potential liability to repay sums charged in excess of statutory authority to affected persons. Council does not consider it appropriate or equitable to refund any of the sums that have been charged in excess of statutory authority.

No provision has been made by the Pharmaceutical Society NI for future costs or refunds in this regard and such sums are deemed to represent a contingent liability. The total amount of fees charged in excess of statutory authority is estimated to be £340k (2020: £340k).

### 12. Related party transactions

During the year, none of the Council members or members of the key management staff has undertaken any material transactions with related parties.

Registrant members of the Council are required to pay a Retention Fee to the Pharmaceutical Society of NI on the same basis as other registrant members.

The CW Young Charitable Trust, The Ronnie McMullan Charitable Trust and the PASS Trust are deemed to be related parties by virtue of the fact the trustees are elected members of the Board of the Pharmacy Forum NI which is an arm's length body under the legislative remit of the Pharmaceutical Society NI. During the year, expenses of £11,133 (2020: £12,196) were recharged from the Society to the Funds. The Funds owe £nil (2020: £1,567) to the Pharmaceutical Society NI as at 31 May 2021 and the Society owes £nil (2020: £nil) to the funds as at 31 May 2021.

