

**Minutes of the Council Public/In Committee Meeting  
 Remote – Via Zoom  
 On Tuesday, 15 March 2022 @ 09:00**

	<p><b>Agenda Item - Present</b></p>	<p><b>Council Members:</b>                  Dr Jim Livingstone (President)                  Mr Jonathan Patton (Vice President)                  Mr Mark McCrudden                  Ms Alison Ragg                  Ms Carol Moore                  Prof Patrick Murphy                  Mr Brendan Garland                  Mr Philip Knox                  Ms Colleen Duffy                  Mr Barry Mimmagh                  Mr Scott Gill                  Mr Gary McMurray                  Ms Sandra Cooke                  Ms Chanel Jones</p> <p><b>Visitors:</b>                  Prof Andy Husband, Chair of GPhC Board of Assessors                  Damian Day, GPhC Head of Education                  Ms Colette Higham – PSA                  Ms Lynsey Alphonso – Boardroom Apprentice</p> <p><b>In Attendance:</b>                  Mr Trevor Patterson (Chief Executive &amp; Interim Registrar)                  Mr Mark Neale (Head of Public Affairs)                  Mr Peter Hutchinson (Policy Standards &amp; Engagement Lead)                  Mr Ryan Duffy (Interim Project Manager)                  Ms June Alexander (Executive Assistant)</p>	<p><b>Apologies</b>                  Ms Joan Duffy</p>
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		<b>Action</b>
1.0	Welcome & Apologies	<p>The President welcomed Council members to the meeting and also welcomed the following guests:</p> <p>Prof Andy Husband, Chair of GPhC Board of Assessors            Damian Day, GPhC Head of Education            Colette Higham, PSA            Lynsey Alphonso, Boardroom Apprentice</p> <p>The President also gave a special welcome to the organisation's new Interim Project Manager, Ryan Duffy, who was attending Council as an observer.</p> <p>Apologies were accepted from Council members Mark McCrudden due to work commitments &amp; Philip Knox due to family bereavement. The President advised that he had sent condolences on Council's behalf.</p>
2.0	Deputations	The President was in attendance throughout. No deputation required.
3.0	Conflicts of Interest	No conflicts of interest were raised.
4.0	Tabling of Any Other Business	No other business was tabled.
5.0	GPhC Presentation to Council: Common Registration Assessment	<p>Prof Husband assured Council of the quality control involved in relation to each question for the common registration assessment. The process looks at how the questions cover the syllabus and also checks the balance of questions. In some cases, areas of the syllabus are hard to assess. The assessment goes through a quality control process by the GPhC Board of Assessors where accuracy, statistics, content and balance are checked.</p> <p>The Board of Assessors then decides on the questions' scores using accepted academic processes. This can be moved based on the performance of the exam</p>

		<p>or cohort. The assessment marks are then decided and the pass mark process implemented.</p> <p>Damian Day advised that the first operational challenge was in 2020 when there was a limited time to source an online provider to run the assessments in 2021. The main learning from this was to always use test centres. There is now a new supplier. The format is the same in all the test centres which are all over Great Britain and Northern Ireland with sufficient capacity in each region.</p> <p>The 2022 assessment is progressing according to plan. The June assessment paper has been written and the writing of the November paper has started. Ensuring compatibility for Northern Ireland students has been included, to assist with this there are 2 Northern Ireland representatives on the Board of Assessors and there are Northern Ireland question writers. The question bank is expanding – it’s a dynamic process.</p> <p>In 2020, there were productive meetings between GPhC and PSNI and data transfer has been very smooth.</p> <p>The President thanks Prof Husband and Damian Day for attending and presenting to Council.</p>	
6.0	<p>Minutes &amp; Key Actions from last meeting <b>For Approval</b></p>	<p><u>Minutes:</u> Council approved and adopted the Minutes of the Public meeting of 25 January 2022 as a true and accurate record of events.</p> <p><u>Actions:</u></p> <p>The only outstanding action, a report on FtP trends, was not due until May 2022.</p> <div style="border: 1px solid black; background-color: #e0e0e0; padding: 5px; margin-top: 10px;"> <p><b>Key Decision / Action:</b> Council approved and adopted the Minutes of the Public meeting of 25 January 2022 as a true and accurate record of events.</p> </div>	<p>Proposed by: Brendan Garland Seconded by: Alison Ragg</p>

7.0	Corporate Strategy Addendum <b>For Approval</b>	<p>Brendan Garland, Chair of the Corporate Strategy Addendum Task &amp; Finish Group advised that the report presented to Council was detailed and covered all issues raised. The main goals remained relevant and only minor adjustments were required, all of which were outlined throughout the document. Resource implications were noted. The Corporate Strategy had been well contrived which was reassuring. He thanked the CEO and his team for their assistance and the Task &amp; Finish Group members for their valuable contributions.</p> <p>The President thanked the Task &amp; Finish Group for their efforts and noted that the report very neatly captures the essence of what the Corporate Strategy Addendum is about. The President referred to the HPA for guidance on the publication of the Addendum.</p> <p>The HPA advised that it would be published on the organisation's website and then an email would be sent to all registrants to advise that the document had been published and was available online. The website would then be monitored.</p> <p>Brendan Garland offered the HPA his assistance for any further work required and also encouraged Council to move forward quickly in terms of the new Corporate Strategy.</p> <p>The President advised that the review of the full Corporate Strategy, with the outcome being a new Corporate Strategy, would need to begin apace with a date being agreed at the next Council meeting.</p> <p>Council approved the Corporate Strategy Addendum.</p> <div style="border: 1px solid black; background-color: #e0e0e0; padding: 5px;"> <p><b>Key Decision / Action:</b>          Council approved the Corporate Strategy Addendum.</p> </div>	Proposed by: Jonathan Patton Seconded by: Scott Gill
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<p>8.0</p>	<p>Council Learning &amp; Development  <b>For Approval</b></p>	<p>The President advised that having a Council Learning &amp; Development Strategy in place was a personal ambition, recognising that Council had to recruit and develop the right people. He praised the report which was very detailed and thanked Carol Moore, the Chair of the Task &amp; Finish Group, and the Group members for their excellent work. He commented that implementation must also be discussed.</p> <p>Carol Moore noted that the strategy was underpinned by key tools including a Council Competency Framework which would identify the competences required; a Skills Framework and Audit of the Council as a whole which would identify the collective skills available within Council; regular appraisal/assessment of individual Council members; and regular evaluation of collective Council effectiveness.</p> <p>It was noted that skills within Council may be at different levels and not everyone would have or require particular skills at the highest level. For instance, for finance, Council would need at least two members with skills at the highest level. The Strategy had skills required at three different levels – understanding, knowledge and practical application and these would form the basis for appraisal and the Skills Audit. If Council were to approve the Strategy, the next step would be to engage a consultant to form practical tools and turn the Skills Framework into a Skills Audit with a questionnaire that could be easily analysed and would help to inform training.</p> <p>Council was advised that, when a training plan was in place, the T&amp;F Group was of the view that most training would be done by “expert” Council members, keeping costs under control, although some independent expertise would be required. Discussions would be required with the CEO and HBO about tendering within the existing budget. Carol Moore thanked the Group members for their valuable contributions.</p> <p>Council congratulated the Group on an excellent piece of work and asked (1) if moving the current annual appraisal to two years would have any implications for the Department of Health NI and (2) in terms of self-assessment, how would</p>	
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		<p>consistency be achieved as some areas were easy to determine whilst others were more subjective. Carol Moore advised (1) difficulties for the Department were not anticipated and (2) that the Skills Framework would be informed objectively based on Council members' experience. The President advised that the Department had never asked about any internal appraisals and that the only time that he anticipated that they might would be when Council members' tenure was to be renewed.</p> <p>The President stated that, although it was an excellent report, there was a question about Council's capacity to actually do it and there was one element missing which was an implementation plan. He asked the Task &amp; Finish Group to produce a simple implementation plan for the May 2022 Council meeting, to include costings with a staged approach to the implementation. He noted that this should be a living Learning &amp; Development Strategy. He thanked the Group for a terrific piece of work,</p> <p>Council approved the Strategy to date on the basis that an implementation plan would be presented to Council in May 2022.</p> <div style="border: 1px solid black; padding: 5px; background-color: #f0f0f0;"> <p><b>Key Decision / Action:</b>          Council approved the Strategy to date on the basis that an implementation plan would be presented to Council in May 2022.</p> </div>	<p>Proposed by:          Jonathan Patton          Seconded by:          Gary McMurray</p>
9.0	<p>IET Consultation  <b>For Approval</b></p>	<p>The CEO advised that this paper was about a range of things that needed to happen as part of the IET regime. The HPA would speak separately about the consultation. By way of introduction, and to put this work in context, he advised that other pieces of work would need to be consulted upon more specifically in the future. As we will be proposing amendments to General Regulations around independent prescribing, we will also look at other changes and modernisation needed within these regulations.</p> <p>The CEO directed Council to the following:</p>	

	<p>12(b): we have been using this Regulation to ensure reciprocal recognition and registration with the GPhC. The regulation would benefit from being re-written.</p> <p>12(c): Foundation Training Year. The regulations are very prescriptive in terms of limiting sites in which pre-registration training can take place and for how long. As Council have a stated aim of trainees entering the register as independent prescribers, there would not be enough settings of the right type. Trainees, in particular in Community Pharmacy, have typically spent all 12 months in that sector. We will need to work with partners to assess the best mix of training sites across the entire IET journey and review the regulations to allow this. This will be discussed at ERIG and with the stakeholder group.</p> <p>Pages 4-5: we are slightly out of kilter with the GPhC on the requirements for sitting the exam, registration and the number of weeks required.</p> <p>(e): the Common Registration Assessment must be taken within 18 months of completing training. We need to formalise extenuating circumstances.</p> <p>(f): This was discussed previously. Legislation sets out how and when we might sit your first, second and third exam. It is not stated that the third is also the final possible exam. Level advice is that the third exam should be final and the legislation should include the word "final." This would be more transparent for trainees.</p> <p>In response to Council questions, the CEO advised that the organisation would usually take legal advice in relation to adjustments to legislation, sometimes from the organisation's retained solicitors but, where there is a potential for conflict of interest, advice is sought from a different group of solicitors. The process that the Department has set out in Article 25a is that we would require the Department's approval before we could make any changes to legislation. The process to instigate this has been set out by the department whereby we write to them with proposals to change or add to the regulations and seek their approval to consult – they then approve the consultation, review the response report and approve the changes. If they approve, they arrange for the laying</p>	
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		<p>of the legislation in the Assembly. Legislation has quite a few areas that require improvement.</p> <p>The HPA advised that the process through the Assembly is that we are responsible for writing it and the Department for laying it. In the past, they would have done the drafting but withdrew from this practice after the fees issue. However, we can't do any of this work without an Executive.</p> <p>In relation to a question of capacity within GP practices for training, the CEO advised that the organisation had been discussing this matter with the CPO. During discussions, he had mentioned that undergraduates would also require placements during the year and significant numbers will want to spend time in GP practices. The Department is very alive to this and their policy is driven by the notion that people will become independent prescribers. We have set up the Education Reform Implementation Group which we chair and all the relevant parties are part of the group – however, not the GP sector – yet. Once we have decided what needs to be done, we will work out how. We are looking at 2025/26 before the first IP qualified trainees emerge.</p> <p>It was noted that there are pressures in the community pharmacy sector for the number of placements required and, in Scotland, the hospital sector is flagging a lack of capacity to take on undergraduates at this stage. Whilst we are overseeing this, the responsibility is moving to the universities and NICPLD. Both organisations are working together, with the Department, to provide placements.</p> <p>In relation to the consultation, the HPA advised that IET, as an undergraduate and post-graduate programme, will give sufficient experience to students to get clinical experience for independent prescribing. The consultation asks key questions:</p> <ul style="list-style-type: none"> <li>• 2-year requirement – we want to remove this</li> <li>• Experience in a specific sector – we want to remove this to facilitate broad educational and clinical experience.</li> </ul>	
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10.0	<p>DHSC Consultation <b>For Approval</b></p>	<p>The HPA advised that the consultation is from the DHSC in London in relation to the future of regulation in terms of current and new healthcare, including social care, professions.</p> <p>The PESL advised that the consultation seeks to consider the risk of potential harm to the public as the most important factor in considering whether or not to regulate particular health and care professions.</p> <p>He advised that the organisation's response has two general points:</p> <ol style="list-style-type: none"> <li>1. We don't think that the consultation document adequately reflects the legislative settlement in relation to the regulation of healthcare professions across the UK. In Northern Ireland, the Assembly has full legislative authority over the regulation of healthcare professionals. In Scotland, regulation of health professions created since devolution in 1998 is devolved the Scottish Parliament.</li> <li>2. The consultation suggested that the PSA might advise government on the need or otherwise for registration and its type. This is a potential conflict of interest as they run the voluntary accredited registers and are funded by the regulators and accredited registers.</li> </ol> <p>The consultation is at an extremely high level, and more detail is needed .</p> <p>In response to a Council query regarding the responses to questions 3 &amp; 4, HPA clarified that the main point in the organisation's response is that we don't want to suggest any change. There is a lack of detail for the way forward. The wording of those responses will be reviewed.</p>	

		<p>The CEO advised that there is no evidence of any research into deregulation and its potential effect on public safety. If a profession is taken out of registration, there is a question as to what effect that would have on the public's confidence in that profession.</p> <p>Council agreed that the response to questions 3 &amp; 4 should be re-worded and released to Council via an e-paper for approval before 28 March 2022.</p> <div style="border: 1px solid black; background-color: #f0f0f0; padding: 5px;"> <p><b>Key Decision / Action:</b> Council agreed that the response to questions 3&amp;4 should be re-worded and released to Council via an e-paper for approval before 28 March 2022.</p> </div>	
11.0	<p><b>IT Budget Increase For Approval</b></p>	<p>The CEO advised that the HBO was absent due to illness. He noted that, at the last Council meeting, the IT Project Manager gave a detailed presentation on progress and feedback from all parties is that what we are getting far exceeds our expectations. We have a fixed price for our IT providers, Fortesium. That has not changed. We have established that one of the things that has helped us to navigate the development and implementation of ROL has been the use of our IT Project Manager. This proposal suggests that we extend the IT Project Manager's contract to the end of the project. At the end of this project, Nitec will become our IT resource and will provide maintenance and management of the system.</p> <p>In response to a Council query regarding the possible benefit of future in-house IT support, the CEO advised that the organisation will always struggle to retain the right calibre of person, due to the lack of IT complexity involved once development is complete. Other larger regulators have confirmed that they struggle to retain IIT professionals, advising that most prefer to work on a consultancy basis across a range of organisations. However, once we have worked with ROL with Nitec for a year, we may need an in-house resource to oversee further development.</p>	

		<p>The Vice-President noted the overspend but that it was an investment in the organisation's IT future. A diverse team of staff is working at home and they the more we can give them the tools required, the better. There is neither the money nor space to invest in additional staff.</p> <p>Council noted the recommendation of the Finance &amp; Performance Committee to approve the increase to the IT project budget by £25k and noted that this was a strategic investment to enhance the quality of the organisation's work and to preserve the integrity of the Register.</p> <p>Council approved the increase to the IT project budget by £25k.</p> <div style="border: 1px solid black; background-color: #f0f0f0; padding: 5px;"> <p><b>Key Decision / Action:</b> Council approved the increase to the IT project budget by £25k.</p> </div>	<p>Proposed by: Brendan Garland Seconded by: Barry Mimmagh</p>
12.0	<p>Scrutiny Committee Annual Report <b>For Approval</b></p>	<p>The CEO advised that it is a legislative requirement that the Chair of the Scrutiny Committee provides a report to Council on the previous 12 months' cases. It is notable that, year after year, there are so few cases that it is difficult to discern any trends or patterns. .</p> <p>The HPA thanked the Chair of the Scrutiny Committee for their report on the cases considered by the Scrutiny Committee in the last calendar year The report will be published on the organisation's website and registrants and others will be informed. The organisation's newsletter will also feature the report and some of its findings and recommendations.</p> <p>The CEO advised that if a case trips the regulator's threshold criteria, it must be referred to the Scrutiny Committee</p> <p>The Scrutiny Committee also quality assures the referral process where a referral is made in that they consider if a case was properly referred to them. In the past year, the Committee has been satisfied that cases have been properly referred.</p>	

		<p>The Registrar has powers to close cases. Our process for quality assuring those decisions involves a learning point review by the Scrutiny Committee Chair. We were waiting for a sufficiently large number of cases to have the Scrutiny Committee Chair review and decide if they agreed with the Registrar's decision and rationale to close the cases. The PSA has however reviewed recent such cases and we are waiting for their response. This negates the need to review past cases. Going forward, the Scrutiny Committee will review closed cases. The CEO advised that, as Interim Registrar, he is keen for any learning opportunities.</p> <p>Legislation requires that the report is published along with Council's observations. Council is, therefore, being asked to make any further observations or comments, as required.</p> <p>Council approved the annual report of the Chair of the Scrutiny Committee and that a letter be sent to its Chair. Council also agreed that the Scrutiny Committee should be asked to undertake a review of cases, over a period of years, to identify any trends or patterns, at a suitable time in the future to avoid additional pressure on staff.</p> <div style="border: 1px solid black; padding: 5px; background-color: #f0f0f0;"> <p><b>Key Decision / Action:</b></p> <ul style="list-style-type: none"> <li>Council approved the annual report of the Chair of the Scrutiny Committee.</li> <li>Council instructed that a letter be written to the Chair of the Scrutiny Committee.</li> <li>Council agreed that the Scrutiny Committee be asked to review cases, over a period of years to identify trends or patterns.</li> </ul> </div>	<p>Proposed by: Sandra Cooke Seconded by: Alison Ragg</p>
13.0	CPD year 2021/22 – portfolios for assessment <b>For Decision</b>	<p>The CEO advised that, in each CPD year, Council directs the Registrar in terms of the overall percentage of submitted portfolios to be assessed and Council historically has directed that 10% should be selected. This figure is of no statistical relevance because the audit is not interpreted as a representative sample, rather a check on compliance by individuals. Selection for assessments are done under 2 criteria – targeted and randomly selected for this reason.</p>	

		<p>Recently returned to the register is a targeted group which comprises 30 – 40 registrants each year. Late submissions are also targeted. Random selection is undertaken by an IT programme generating random numbers. Each year, between 20-30 registrants fail to meet the standard at first assessment but, by the end of the remediation stages, all usually meet the standard. The process is consistent. We have a team of independent CPD assessors who are paid per portfolio assessed and the number of portfolios that we select for assessment, therefore, has an impact on costs. The budget assumes 10% - however, this is entirely a matter for Council.</p> <p>The President noted that the 10% sample of portfolios to check the quality of CPD is a reminder to registrants that there is a chance that, at some stage, their CPD portfolio could be selected for assessment.</p> <p>The CEO advised that the IT system has checks and balances and won't permit submission of a portfolio which does not meet certain criteria, providing a quantitative check on every portfolio.</p> <p>The President requested a report on how other regulators differ in their management of CPD assessment. This is not required urgently.</p> <p>In response to a Council question, the CEO advised the results from the previous year's annual CPD assessments is reported in the Annual Report. Pharmacists whose names have been removed from the Register for non-compliance with the CPD Framework are named and the names published on our website.</p> <p>Council approved the selection of 10% of CPD portfolios submitted for assessment.</p> <div data-bbox="685 1299 1704 1425" style="border: 1px solid black; background-color: #e0e0e0; padding: 5px;"> <p><b>Key Decision / Action:</b>                  Council approved the selection of 10% of CPD portfolios submitted for assessment.</p> </div>	<p>Proposed by:                  Alison Ragg                  Seconded by:                  Gary McMurray</p>
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14.0	<p><b>President's Report For Information</b></p>	<p>The President advised Council of the following:</p> <ol style="list-style-type: none"> <li>1. Venue for next Council meeting:                     <p>The President noted that Council has been meeting remotely for 2 years and questioned whether it was timely for the next Council meeting to be convened as a face-to-face meeting and, if so, should the meeting be at 73 University Street or elsewhere.</p> <p>Council members responses included:</p> <ul style="list-style-type: none"> <li>• There would be a benefit to meeting face-to-face but Council had been effective whilst meeting remotely over the past 2 years.</li> <li>• There is still a risk from Covid-19 and a face-to-face meeting in May/June may be premature.</li> <li>• Council needs to be conscious of public messaging and, given the continued pressure on the health service, this may not be the right time to resume face-to-face meetings.</li> <li>• It may be prudent to wait and, on returning to face-to-face meetings, to use the opportunity to undertake some team building and bonding with new members. More planning would be required.</li> </ul> </li> <li>2. GPhC Chair:                     <p>The President advised that the Chair of the GPhC, Nigel Clarke, had stepped down after 8 years. The President had written to him on Council's behalf to congratulate him on his time as Chair and had also written to the ne Chair to welcome her and to express our hope for the continuations of our good working relationship with GPhC.</p> </li> <li>3. Council Recruitment:                     <p>The Department has advised the President that the recruitment exercise will commence in March after Ministerial approval.</p> </li> </ol>	
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15.0	<p>CEO's Report <b>For Information</b></p>	<p>The CEO advised as follows:</p> <ol style="list-style-type: none"> <li>1. There had been a productive meeting with the Department in relation to Pharmacy Technicians. It was a preliminary meeting to see if they were minded to go out to consultation and they have confirmed that they will proceed. Last week, the CEO, Legal Officer and Interim Project Manager shared a first draft of the consultation. It poses the question of whether pharmacy technicians should be registered with the same Regulator as pharmacists and premises and should entry onto the Register be based on qualifications. It addresses the issue of grandparenting around consistency of entry onto the Register. Hopefully, this will go out before purdah. Then the next step, should the minister agree, will be around building our capacity to look at entry routes which will be a substantial piece of work.</li> <li>2. The remaining Section 60 Orders are now hoped for July 2022.</li> <li>3. Definitions: What is a Chief Pharmacist for hospital pharmacy in the context of a defence in dispensing errors? This and other work with GPhC on the</li> </ol>	

		<p>Standards for Superintendent Pharmacists and Responsible Pharmacists has started. This will involve consideration of arrangements for higher level supervision.</p> <p>4. We are planning for training for FtP panellists by the end of May. An external legal organisation has been commissioned to update the FtP manual. The Executive Team will discuss this with the President and Vice-President and may need to issue an e-paper to Council for formal approval of the FtP Manual. This will depend on the extent of the changes made by the lawyers. It will bring us into line with best practice. It is an important piece of work as there is a heavy reliance on the manual by everyone involved in FtP.</p>	
16.0	Progress against Strategy <b>For Information</b>	The CEO advised that there had been little change since the last Council meeting and referred members to the executive summary. There were no questions.	
17.0	Finance <b>To Note</b>	Council noted the content of the financial papers provided.	
18.0	Correspondence Log <b>For Information</b>	<p>Council noted the content of the correspondence from the Minister for Health, Robin Swann MLA, to the President in relation to the closure of the temporary register. Emergency legislation will continue for 6 months. It is the organisation's intention to make a statement in conjunction with GPhC – the temporary register will continue for 6 months with no new registrations and anyone on the temporary register who wishes to continue to practise should enter onto the main Register after June 2022.</p> <p>The CEO advised that, for entry onto the temporary register, the organisation does not undertake all the checks undertaken for entry onto the main Register. Those pharmacists wishing to enter onto the Register will need to make a full application which will undergo all the required checks.</p>	
19.0	Any Other Business <b>For Information</b>	None.	

20.0	Date of next meeting <b>To Note</b>	The next Public Council meeting is scheduled for Tuesday, 17 May 2022 @ 09:30.	
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**The Meeting closed @ 11:55**