

**CORPORATE STRATEGY PROGRESS REPORT - NOVEMBER 2021**

**Objective 1: To deliver high quality pharmacy regulation that is proportionate and cost-effective**

No	Goals	Current Status	Tending towards	Update - Feb 22	RMT and likelihood
a	We will meet all performance standards in annual PSA appraisals in at least 4 of the next 5 years.			Last year's annual review resulted in meeting 22 of 24 standards - work is complete to address the customer service issues identified for improvement in FtP. The current year shows failure to meet three standards which is disputed but not appealable.	TP
b	We will secure policy agreement with DoH to make legislative and non-legislative changes required to modernise pharmacy regulation and, following policy agreement, develop an implementation plan for delivery, including delivery of actions specified by May 2023. (Revised 10/1/22)			Whilst we have agreement from the CPO to work together to produce a 5 year plan, it is not formalised. A statement from DoH will be sought and the policy agreement will be made, however, it will take a number of years to deliver the policy intent.	TP

c	We will secure policy agreement with DoH for the statutory regulation and registration of technicians and, following approval, consult upon entry routes to the register.			The recently published Pharmacy Workforce Review Board report, of which we were a part, sets out the intention to register technicians. We await confirmation of ministerial support which is now expected in 2021. This satisfies the goal, a number of years will be required to action. T&F group from DoH building a consultation with our input	TP
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No	Goals	Current Status	Tending towards	Update - November 2021	SMT
d	We will employ a financial strategy (to be reviewed annually to increase efficiency and cost-effectiveness) and report against targets therein bi-annually.			Strategy complete. Approved by Council in November 2018. Implemented April 2019.	JD
e	We will collaborate with other relevant Regulators and PSA to effect change designed to maximise use of shared principles and practices.			A number of joint statements have been issued, for example, on candour and directing payments in relation to medicines. CEORB was established to provide momentum and a number of projects are underway and a large number of sub-groups meet regularly - there is significant evidence of shared work arising from Covid 19	TP

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No	Goals	Current Status	Tending towards	Update - November 2021	SMT
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, introduction of premises standards and delivery of standards and guidance around RPs and SPs.			Premises - working group established for the introduction of outcome based Premises Standards in NI which we co-chair. Resource issues in DoH now resolved and implementation of Premises Standards is progressing. RP, SP, hospital defence and Deputy Registrar are all consulted upon and await laying. We have been advised in November 2021 that the S60 Orders may be laid in Westminster in April 2022. this would permit work to commence and potentially complete within the lifetime of the strategy Latest information is now into operation July 22 (as of 22/2/22) - still time to deliver	TP

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**Objective 2: To set pharmacy standards that are evidence-based, output-focused, achievable and necessary for patient and public safety**

No	Goals	Current Status	Tending towards	Update - November 2021	SMT
a	We will review and, where appropriate, enhance the current set of pharmacy standards. We will complete a full review of the Code by May 2023 followed in next corporate strategy by phased review of Standards related to the Code.			Review has been completed and a programme of Standards revision is underway. All other revisions are on schedule though staff shortages may impact all of 2a - 2c. TP liaising with DH on compliance indicators for premises standards and CPD approved and now implemented Plan being developed to deliver Code review	MN
b	We will test the ongoing efficacy of pharmacy standards in context of the newly emerging HSC reform programme as part of goal 2a.			The HSC reform programme and the impact on Pharmacy service provision remains unclear. However, we continue to liaise with the Board in regards to the new developments. We are currently working with the Dept & stakeholders on the emerging pathways for education and this will lead to further work.	MN

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 to ensure that they remain fit for current and future practice. Subject to review at the next Corporate Strategy review.			This remains difficult until the developments in 2b are more clear.	MN
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**Objective 3: To conduct Fitness to Practise processes that are robust, timely and fair**

No	Goals	Current Status	Tending towards	Update - November 2021	SMT
a	We will improve timeliness, efficiency and cost of Fitness to Practise processes and report on progress made.	Green	Green	Most FTP cases are being held remotely due to Covid 19 or blended attendance. Arrangements have been put in place to accommodate requests for in person hearings and, as of June, this has been able to take place. Efficiency in FTP cases is reduced due to time delays with external agencies due to the current pandemic.	LH/MN
b	We will ensure regular reports on learning from Fitness to Practise cases are effectively disseminated to pharmacists and other interested parties.	Green	Green	Reminders being placed on Facebook and key learnings shared via the regulatory Newsletter.	MN
c	We will develop Fitness to Practise processes for Pharmacy Technicians.	Green	Yellow	This is to synchronise with the registration of technicians and we have commissioned work to begin in this area beginning with legislative reform in relation to the Registration of Pharmacy Technicians.	LH

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**Objective 4: To ensure that pharmacy education and professional development is fit for purpose**

No	Goals	Current Status	Tending towards	Update - November 2021	SMT
a	We will review the Pre-Registration Framework and implement necessary improvements including developing a plan for, and commencing transition to a Foundation Training Year.			Stakeholder event on IETP held in Nov 2020. A new IETP Advisory Group has been set up to advise GPhC and PSNI Councils on IETP Standards and their implementation. The aim of these standards is to transform the education and training of pharmacists. As part of this work, NICPLD will operationally run the Foundation programme for 2021 intake.	LH
b	We will review and improve undergraduate and accreditation standards with our partners. We will work with our partners on delivery of the implementation plan for undergraduate and accreditation standards.			Accreditation visits completed for 2019 and UU report on Sept 21 Council agenda EGOB work will impact in this area.	LH

c	We will explore the feasibility of developing a joint education strategy with both NI Universities and GPhC. <b>We will lead on the development of the new IET Standards and their implementation.</b>			This work is now being taken forward through the Education Reform Implementation Group. Common Registration Assessment arrangement with the GPhC will begin in November 2021. Progress being made with both FTY and undergraduate - target for completion 25/26	LH
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**Objective 4: To ensure that pharmacy education and professional development is fit for purpose**

No	Goals	Current Status	Tending towards	Update - November 2021	SMT
d	We will review CPD processes and develop a strategy for the establishment of a Continuing Fitness to Practise regime. <b>We will undertake to engage with stakeholders in relation to the development of a Continuing Fitness to Practice Strategy.</b>			CPD Framework consulted upon and revised framework approved by the Council March 2020. The new CPD framework has now taken effect as of 1st June 2021 and is in operation for this CPD year 2021/2022.	LH
e	Post Registration Education and Training. Develop a PSNI policy position and implementation strategy for Post Registration Education and Training arrangements for pharmacists and pharmacy technicians, when registered, operating within Northern Ireland. Added 10/1/22.				

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**Objective 5: To be an accountable organisation with effective governance and operations**

No	Goals	Current Status	Tending towards	Update - November 2021	SMT
a	We will establish effective deputising arrangements for the Registrar.	Green	Green	As reported under Goal 1(f), this is awaiting laying. In the interim, we have twice used a protocol to appoint an interim at relatively short notice. Also as reported, deputy registrar provision expected 04/22.	TP
b	We will secure policy agreement with DoH on resolving the current Pharmacy Professional Leadership linkage with the Regulatory function. <i>We will agree a plan to deal with the link between the Leadership and Regulatory functions.</i>	Green	Yellow	This relates to 1 (b) and, whilst policy agreement with CPO is in place, we await ministerial approval.	TP
c	We will annually review audit schedules, risk management processes and performance measurement organisationally and implement necessary changes for improvement.	Green	Green	2 years of the recently approved 3 year Internal Audit Plan remain. We re-appointed internal auditors in 2021, tender delayed due to Covid 19. Three internal audits conducted in 2020/2021 all with satisfactory controls and no priority 1 recommendations. New External Auditor in place for 2020/2021.	TP

d	We will develop a new ICT Strategy and deliver against relevant goals, reporting to Performance and Finance Committee at least twice per year.			ICT Strategy complete, implemented 2019. Full review in 2021, new ICT Strategy approved at F&P, recommendation for approval & implementation approved by Council 23rd Nov 21	JD
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**Objective 5: To be an accountable organisation with effective governance and operations**

No	Goals	Current Status	Tending towards	Update - November 2021	SMT
e	We will review and improve organisational governance.			Governance review concluded and new committee structures in place. Further work to be done on performance management including appraisal	TP
f	We will formulate and implement a new HR Strategy to improve organisational resilience, efficiency and effectiveness <b>and deliver against relevant goals, reporting to Performance and Finance committee at least twice per year.</b>			Strategy complete. Implementation February 2019.	JD

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. <b>Key issues around recognition of qualifications and recent MHRA approach to PSNI re development of guidance on medicines use in N.I.(NIMAR)</b>			Have met with GPhC and PSI for preliminary discussions on future recognition - have signed a data sharing agreement with PSI. BIES consultation launched on alternative assessments for international qualifications	TP
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**Objective 6: To communicate effectively, be accessible and responsive**

No	Goals	Current Status	Tending towards	Update - November 2021	SMT
a	We will improve and report on communications effectiveness.			Communication report to be delivered to Finance and Performance Committee	MN
b	We will develop a new strategy designed to enhance the public, pharmacy, media and political profile of the organisation. <del>We will implement our Communicatons Strategy and report on its effectiveness including the response to and effectiveness of our Reach Out programme.</del>			Following the ASM Audit, and the annual Stakeholder survey the Strategy will be revised and updated in line with outcomes of both. To be delivered to Council by Nov 2021.	MN
c	<del>We will develop a "Reach Out" Programme to better engage with the public and pharmacists on regulation (What, Why, When and How).</del>			In the current circumstances, further Outreach events by Council have been postponed. Outreach activities will resume once public meetings are permitted. This has been incorporated into 2b.	MN

d	We will review and keep under review our current public consultation protocol.			This work has been delayed due to staffing issues and other pressures, . However work remains ongoing with an increased use of online focus groups and stakeholder involvement which is proving both popular and effective. These lessons will be incorporated into the review which can still be achieved by the end of 2022	MN
e	We will review and improve external and internal complaints processes.			This review has now been complete and proposals are coming to the April Council meeting	MN

Additional Suggestions from T & F Group: RAG system:

-  May be something that the team can do, deliver and has the resources to undertake;
-  Can't be done with current resource - may be possible with additional resource; and
-  Remains important but team can't get to it due to priorities or resourcing.