

Modernising pharmacy regulation: an inspector calls

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About the GPhC

- 1.2 million registered health professionals in the UK – including 47,300 pharmacists and over 22,000 pharmacy technicians
- GPhC is one of nine health professions regulators
- we also register pharmacies. There are more than 14,000 pharmacies on our register, including “Closed” pharmacies (Online)
- we are funded by those who register with us (pharmacists, pharmacy technicians and pharmacy owners)

Our statutory role

- “To protect, promote and maintain the health, safety and wellbeing of members of the public...by ensuring that registrants, and those persons carrying on a retail pharmacy business... Adhere to such standards as the Council considers necessary...”

How?

- **Education:** approving qualifications for pharmacists and pharmacy technicians, and accrediting education and training providers
- **Registration:** maintaining the register of pharmacists, pharmacy technicians and pharmacy premises
- **Setting standards:** for conduct, ethics and performance; education and training; continuing professional development (CPD); and for the safe and effective practice of pharmacy at registered pharmacies
- **Fitness to practise:** making sure professionals on our register are fit to practise and dealing fairly and proportionately with complaints and concerns.

WHY?

The GPhC developed from the RPSGB and is/was designed to strengthen the regulation of pharmacy, not just of pharmacy professionals

What do we do?

- We register competent professionals to practise pharmacy and set standards/regulate the system for managing and delivering pharmacy services from registered premises

So, What's the difference?

- Seen most clearly in our work on the standards for registered pharmacies, which are different and distinct from our professionals standards (conduct, ethics and performance)

Our standards



What we want to achieve

“Our vision is for pharmacy regulation to play its part in improving quality in pharmacy practice and ultimately health and well-being in England, Scotland and Wales”

(From our Strategic Plan 2014 – 2017)

Professionalism – a key strategic aim

- using regulation to promote a culture of patient-centred professionalism in pharmacy
- regulating in a way which supports pharmacists and pharmacy technicians to embrace and demonstrate professionalism in their work
- professionalism, not rules and regulations, provides most effective protection for patients
- prescriptive rules let us all off the hook

Standards for registered pharmacies

General
Pharmaceutical
Council

Standards for registered pharmacies

September 2012



Standards for Registered Pharmacies

- focus on outcomes for patients - what safe and effective pharmacy practice looks like for patients
- leaves it to pharmacy professionals to decide how to deliver that safe and effective practice. They are the experts
- pharmacy owners and superintendents are accountable for meeting the standards

What do we mean by outcome

- an outcome is the ultimate result of something being in place or of an action being undertaken
- example: putting in a pedestrian crossing is an **input**
 - Increased driver awareness of a designated “safe place to cross” is a **primary outcome**
 - People are safer crossing the road is a secondary but the more important **outcome**



Five principles

- Principle 1 – looks at how risk is managed
- Principle 2 – looks at how people / staff are managed
- Principle 3 – looks at how the building / premises is managed
- Principle 4 – is about how pharmacy services are delivered
- Principle 5 – is about equipment and facilities used to deliver the services

Meeting the standards

- ‘Show and tell’ approach – pharmacies decide how to demonstrate they are caring for patients and practising pharmacy safely and effectively

- And produce the evidence

- inspectors talk to the pharmacy team and test scenarios; observe staff with each other and with patients; look at documentation

But remember

- inspections are not the only way we provide assurance - owners and superintendents renewing registration of their pharmacies need to declare they have read the standards and undertake to meet them

Key elements of our approach to inspection

- prototype of inspection approach running since 4 November
- testing four indicative judgements of performance – poor, satisfactory, good and excellent
 - Inspection outcome decision framework to aid inspectors in making consistent judgements
- pharmacy owner and superintendent will get a report, but no public reports during prototype phase
- improvement action plans are operational
- strategic relationship management has started

Inspection labels and descriptions

Poor pharmacy

- has failed to achieve the pharmacy standards overall. There are major concerns that require immediate improvement

Inspection labels and descriptions (cont.)

Satisfactory pharmacy

- achieves all or the majority of standards but may require some improvement action to address minor issues

Inspection labels and descriptions (cont.)

Good pharmacy

- achieves all standards consistently well and has systematic review arrangements that ensure continual improvement in the quality and safety of pharmacy services delivered to patients

Inspection labels and descriptions (cont.)

Excellent pharmacy

- demonstrates all the hallmarks of a good pharmacy. In addition, it is either innovative and/or provides unique services that meet the health needs of the local community and that other pharmacies might learn.

Resources

- Our online resource includes links to useful documents e.g. our evidence bank and the inspection decision making framework.

<http://pharmacyregulation.org/pharmacystandardsguide>

Questions?



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