January 30th, 2023

Notice Of Meeting

You are requested to attend the meeting to be held on **Tuesday, 31st January 2023** at **9:30 am** in **Hybrid.**

Agenda

1.0 Welcome & Apologies

Welcome to: Siobhan Carson & Chris Pawluczyk (PSA) and Jenda McSwiggan (Boardroom Apprentice)

Apologies: Mark McCrudden, Alison Ragg & Chanel Jones

1.1 Hybrid Attendance

In Person:

Geraldine O'Hare; Jonathan Patton; Gary McMurray; Patrick Murphy; Barry Mimnagh; Carol Moore; Scott Gill; Brendan Garland.

Zoom:

Philip Knox

2.0 Deputations

3.0 Conflicts of Interest

4.0 Tabling of Any Other Business

FOR APPROVAL

5.0 Minutes and Key Actions arising from last meeting

For Approval

Council is asked to approve and adopt the Minutes of meeting dated 22 November 2022 as a true and accurate record of events.

Council - Public Meeting Minutes - 221122 - Draft.pdf ***Page 1***

Key Decisions and Actions - Council Public Meeting - 221122.pdf ***Page 13***

FOR INFORMATION

6.0 President's Report

For Information

Verbal report.

CPANI Mentoring Scheme - Expression of interest.docx ***Page 14***

7.0 CEO's Report

For Information

Verbal report.

8.0 Quality Assurance of the Foundation Training Year

For Information

Council is asked to review the content of the attached paper.

Council Paper- FTY - Quality Assurance Report Jan 2023.pdf ***Page 17***

9.0 Report on Progress against Strategy

For Information

Council is asked to review the attached report. Executive Summary provided.

Corporate Strategy - Council Progress Report - January 2023.pdf ***Page 22***

Executive Summary - Corporate Strategy - Council Progress Report - January 2023.pdf ***Page 40***

10.0 Any Other Business

For Information

11.0 Date of next Council Public Meeting

For Information

The next Council Public meeting is scheduled for 21 March 2023 at 09:30. Venue to be confirmed.

Invitees

Ms June Alexander

Mrs Joan Duffy

Ms Colleen Duffy

Mr Ryan Duffy

Mr Brendan Garland

Mr Scott Gill

Mrs Laura Hughes

Mr Peter Hutchinson

Ms Chanel Jones

Mr Philip Knox

Mrs Michaela McAleer

Mr Mark McCrudden

Mr Gary McMurray

Ms Jenda McSwiggan

Mr Barry Mimnagh

Ms Carol Moore

Professor Patrick Murphy

Mr Mark Neale

Dr Geraldine O'Hare

Mr Jonathan Patton

Ms Alison Ragg

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Minutes of the Council Public Meeting
Back Hall, Society House
On Tuesday, 22 November 2022 @ 09:30

	Agenda Item - Present	**Council Members:** Dr Geraldine O'Hare (President) Mr Jonathan Patton (Vice President) Mr Mark McCrudden Ms Alison Ragg Ms Carol Moore Mr Brendan Garland Mr Philip Knox Mr Barry Mimnagh Mr Scott Gill Gary McMurray **Visitors:** Ms Jenda McSwiggan, Boardroom Apprentice **In Attendance:** Mr Trevor Patterson (Chief Executive) Ms Laura Hughes (Registrar & Director of Regulation) Ms Joan Duffy (Director of Business Operations) Mr Mark Neale (Director of Public Affairs) Mr Peter Hutchinson (Policy Standards & Engagement Lead) Mr Ryan Duffy (Interim Project Manager) Ms June Alexander (Executive Assistant)	**Apologies** Colleen Duffy Patrick Murphy Chanel Jones

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			Action
1.0	Welcome & Apologies	The Vice President welcomed the new President, Dr Geraldine O'Hare, to Council. The President stated that she was very privileged to have been appointed as President and was looking forward to meeting and becoming acquainted with each Council member individually over the next couple of months, although she and Carol Moore were already acquainted, having worked together in the Department of Justice. She advised that she had worked across health and justice organisations for 25 years and had been involved in psychological regulation and development of training for psychologists for many years. The President thanked the CEO and SMT members for her warm welcome and for her thorough induction. She was impressed with what she had learned of the organisation and how it operates. The President also thanked the Vice President for all his assistance and advice. Finally, the President advised that she had read and was impressed by the calibre of the Council papers.	
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.	

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5.0	Minutes & Key Actions from last meeting **For Approval**	Minutes: Council approved and adopted the Minutes of the Public meeting of 27 September 2022 as a true and accurate record of events. Actions Arising: • Council Training & Development: Carol Moore advised that the report had been passed to the former President and then to the Vice President to confirm that he was content. Think People's work was done and the project would now move to the implementation stage. Council needed to address when and what parts of the report could be released as the report contained personal and confidential information which would easily reveal individuals' identities - this would be undertaken by discussion offline. The Vice President advised that the report would be passed to the President for further action. Carol Moore offered to meet with the President to provide the background to the project. **Key Decision** Council approved and adopted the Minutes of the Public meeting of 27 September 2022 as a true and accurate record of events. **Actions** • Council Training & Development – meeting to be arranged and President will review report and come back to Council to discuss further.	Proposed by: Mark McCrudden Seconded by: Alison Ragg

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			Action
6.0	Finance **For Approval**	The President reminded Council that the draft budget was presented to Council each November for review and to decide if there was to be an increase in retention fee for the coming registration year and was brought back to Council each April.	
6.1	Cash Projection Q1 and Finance Dashboard Q1 **For Information**	The Chair of the Finance & Performance Committee, Gary McMurray, advised that his committee met on 10 November 2022 to review the comprehensive suite of financial papers and that a number of recommendations were being brought forward to Council. <u>Financial Dashboard</u> The following was highlighted in relation to a review of the current year's forecast performance: • Income remains in line with budget. • Expenditure is £119k over budget. • Fitness to Practise is £96k over budget. It is difficult to forecast re complex cases. Within the figure are 4 long running cases accounting for £74K. These will be concluded by the end of the financial year. The team continually monitors the Fitness to Practise pipeline and the pipeline report will be brought to the Finance & Performance Chair monthly and thereafter, when appropriate, to Council. The Registrar advised that individual cases were proving more costly in terms of additional medical tests, etc. This will be taken into consideration when forecasting. • IT - Risk Register £28K; additional recruitment costs £19k. The Risk Register and Azure are recurring costs.	Proposed by: Brendan Garland Seconded by: Carol Moore

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			Action
		• Project costs are in line with budget. • Deficit of £368k. • Significant reserves are in place and the deficit is fully covered. The F&P Chair advised that he would continue to monitor closely. He also advised that Evelyn (investments) would be making a presentation to Council at its January 2023 meeting in relation to its investment portfolio performance and the level of risk.	
6.2	Budget 2023/24 **For Approval**	The Finance & Performance Chair directed Council's attention to the papers provided and advised that the Executive Team were recommending the recruitment of two additional resources – a Paralegal to work within the Fitness to Practise team and a Policy Officer to work within the Policy, Standards and Adjudication team. An additional resource version of the budget was within the papers for Council to review. He advised that the recommended recruitment of a paralegal would increase in-house capacity and assist with primary handling of Fitness to practise cases. In addition, the number of Statutory and Scrutiny committee meetings has created additional administrative pressure on the team – in additional to legislative and regulatory changes. The recommended recruitment of a policy officer would increase in-house capacity to respond to the increased workload. The recruitment would result in savings in project costs and negate the need for costly external support. The Fitness to Practise Committee was happy to recommend to Council for approval.	

			Action
		The CEO advised that recruitment and staff absence was later in the agenda. The registration of Pharmacy Technicians will be involve a significant workload in terms of legislative reform in partnership with the Department and the organisation wants to be involved in the drafting. The following year, the organisation will be responsible for writing regulations. This will be labour intensive. The target for Pharmacy Technicians is January 2024. The organisation has also been asked to review the Code - paper later in the agenda. Every standard will need to be reviewed in light of any changes to the Code. We will need people to develop and have legal oversight of them. The review of standards is a recurring activity over 3-4 years. The Registrar advised that the current marketplace has been researched with recruitment consultants and the organisation was hopeful in terms of a successful recruitment exercise. However, it will wait for the right person. In terms of a back-up plan, and the suggestion that CFR might be asked to provide personnel, the Registrar advised that nothing was off the table. Council members voiced their support for the motion and agreed that it was imperative to secure good staff to relieve the pressure on SMT and staff teams. Ideally, if approval was given, the team would like to go out to recruitment before Christmas with a view to shortlisting in early January 2023.	

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			Action
		The DBO highlighted the following, based on the prior year and taking cash projections into consideration: • Income increase of at least £13K if the organisation moves to Flagstone • Retention income increase • Expenditure increase of £107k • Salary increase of £55k • Fitness to Practise increase of £19k – looking at prior year budget, current status and taking out the 4 historic cases. Projecting FtP costs of £158K. This is being brought to Council now to ascertain if retention fees are to be increased. • Operating deficit of £117k • Project costs £100K • Deficit after projects £216K. The CEO advised Council that year-end reserves were £1.6M which is £600k over the reserves policy figure. Council may want to consider reviewing the reserves policy in the coming year to ensure that we maintain reserves at the required level and to justify the level of reserves to registrants. He advised that the Executive Team constantly looks at ways to manage and keep costs down. Council approved recruitment as recommended by the Finance & Performance Committee. **Key Decision** Council approved recruitment as recommended by the Finance & Performance Committee.	Proposed by: Mark McCrudden Seconded by: Brendan Garland

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			Action
7.0	Flagstone Cash Management **For Approval**	Further to previous discussion, the Chair of the Finance & Performance Committee, on behalf of his committee, recommended that Council approve the transfer of £600k from the organisation's current account to the Flagstone Cash Management portal to invest in FSCS approved UK bank fixed term deposit accounts. He advised of the initial administration fee of £500 and of the interest rate of 0.25% per annum. Currently, the organisation had £220K in a Bank of Ireland fixed term deposit with an interest rate of 0.01%. Council approved the transfer of £600k from the organisation's current account to the Flagstone Cash Management portal. **Key Decision** Council approved the transfer of £600k from the organisation's current account to the Flagstone Cash Management portal.	Proposed by: Barry Mimnagh Seconded by: Jonathan Patton
9.0	President's Report **For Information**	The President advised of the following meetings: • Meeting with the CPO, prior to taking up position, with another meeting scheduled in two weeks. • Meeting with PSA in London on 14/11/22, primarily in relation to the Safer Care for All report and included a lengthy discussion around the need for a Commissioner and further discussion is required around what added value a Commissioner would bring.	

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			Action
		Discussion also around workforce issues and the need for a workforce plan; how to attract the right people and retain them. Good discussion around EDI and its challenges. A key part of the discussion was around collection of data and developing the sharing of data locally and nationally. In terms of FtP, there was discussion around issues across the regulators. Overall, this first meeting was very positive. • Meeting scheduled for 08/12 to meet with the Chair of GPhC, Gisela Abbam, with the CEO. • Attending the meeting of the Educational Reform Implementation Group on 15/12/22. • Attending the meeting of the Pharmacy Workforce Review Group on 26/01/23. • Attending the UU prizegiving on the evening of 29/11/22. The President also advised that she had been invited to give a talk to UU students and hoped to do so in the New Year. And, finally, the President received an unusual meeting request from a 15-year-old Banbridge schoolboy who provided a comprehensive list of the people he has met and the memorabilia he has collected. In closing, the President acknowledge the busy role and the big shoes to fill.	

			Action
10.0	CEO's Report **For Information**	The CEO advised that the UK Commission of Pharmacy Leadership had been established by the 4 CPOs to interrogate what good leadership looks like. There are 4 workstreams and the CEO is involved in Regulatory Support. It feels like it may go somewhere. The likely outcome from the recommendations will be a template of good professional leadership in pharmacy. From the organisation's perspective, leadership is not thought of as a single body in the UK. Standards belong to the regulator – they are fit for purpose and set out competence for admission to the Register. Difficulty arises in relation to technical standards i.e. Fitness to Practise cases. The issue at the moment is that the GB professional body for pharmacy keeps a lot of information behind a wall which only members can access and it raises a question over whether that is the correct approach. There is growing recognition that although professional bodies must look after their members, they must do so in the public interest. The next meeting is scheduled for 08/12/22 and the CEO advised that he would draft a report to Council thereafter. The CEO also advised that he meets with Alan Clamp, CEO of PSA, annually to discuss the business plan. This year he asked what PSA could do to help regulators do a better job. The CEO gave comprehensive feedback including that regulation was not the only solution. In terms of the Performance Review, feedback was positive and the experience was a lot less resource intensive with an acceptance of view and discussion which worked well. Overall, it was a better experience and was quite useful.	

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			Action
		Peter Hutchinson agreed and hoped that next year would see the maintenance of that helpfulness and working together to help direct this organisation in the work that it does.	
11.0	Review of the Code **For Information**	The DPA advised that the paper presented provided Council with an overview of the plan, headline timetable and activities undertaken and to be undertaken, to meet Council's objective of completing a full review of the Code by May 2023 followed in the next corporate strategy by phased review of Standards related to the Code. An expert advisory group met on 15/11/22 comprising good representation of the profession although very little public representation. He highlighted the following timeline: • **15th of November 2022** will be the first meeting with the AG to test our initial work and assumptions • Redrafting completed Jan/February 2023 • Advisory Group Meeting March/April 2023 • Council approval of draft for Consultation April/May 2023 • 12-week public consultation launched May 2023. • Advisory Group Meeting on Imbedding plan • Launch of new Code August/Sept 2023 • Full Implementation after Transition Period December 2023 Discussion ensued around the composition and selection of members of the advisory group. The DPA advised that regular updates would be brought to Council regarding the content of the review, progress and any areas of concern.	

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			Action
12.0	Report on Progress against Strategy **For Information**	The CEO directed Council to the Executive Summary provided and highlighted that the RAG system that the organisation uses showed the current status and tending towards status. He advised the following: 1(a): PSA appraisals: 2020 year shows failure to meet 3 standards – this is disputed but not appealable. The aspiration to meet all performance standards in at least 4 out of 5 years remains good but is rather hard to achieve. 2(s): The aspiration is to look at the feasibility of setting standards to go beyond the absolute minimum. This is to be reviewed at the next corporate strategy review meeting and it would be worth looking to see if it still remains a valid goal. 5(b): Professional leadership -v- Regulation. A helpful outcome to this would be how professional leadership could best be delivered in this jurisdiction. As discussed before, the template will be helpful to show what good leadership looks like.	
13.0	Correspondence Log **For Information**	Council reviewed the correspondence provided.	
14.0	Any Other Business **For Information**	No other business was tabled.	
15.0	Date of Next Council Public Meeting	The next Public Council meeting is scheduled for 09:30 on Tuesday, 31 January 2023 and this will be a hybrid meeting.	

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Key Decisions & Actions
Council Public Meeting
On Tuesday, 22 November 2022 @ 09:30

			Decision/Action
5.0	Minutes & Key Actions from last meeting **For Approval**	Minutes: Council approved and adopted the Minutes of the Public meeting of 27 September 2022 as a true and accurate record of events.	Decision
6.2	Budget 2023/24 **For Approval**	Council, having considered the recommendations of the Finance & Performance Committee: • approved additional staff resource; • approved the Budget 2023/24; and • decided that there should be no increase in Retention Fees for 2023/24. Budget 2023/24 to be reviewed again at Council's May 2023 meeting.	Decision Action
7.0	Flagstone Cash Management **For Approval**	Council, on the recommendation of the Finance & Performance Committee, approved the transfer of £600k from the current account and £200k from the fixed term deposit account to the Flagstone Cash Management portal to invest in FSCS approved UK bank fixed term deposit accounts.	Decision

CPANI
The Commissioner
for Public Appointments
Northern Ireland

For the attention of the Chair of the Board

18 January 2023

CPANI Public Board Mentoring Scheme

Since 2017 the office of the Commissioner for Public Appointments (CPANI) has collaborated on a mentoring scheme for graduate students from the Queen's University Belfast and the University of Ulster, matching a student mentee with a mentor from the Board of a public body. This scheme enables public appointees to share their professional experience and knowledge with a diverse group of people many of whom come from our younger generation.

As you may be aware the post of Commissioner is currently vacant, we intend nonetheless to run the scheme for a new intake of student mentees beginning in March 2023.

CPANI is committed to working with others to develop a public body governing sector that is more diverse and representative of the community it serves. We also want to continue to extend awareness of the work of our public bodies and promote them as an interesting experience for talent across our society. The mentoring scheme is part of these outreach efforts. We hope that you feel that your Board may benefit from such efforts.

Further information on the scheme is attached at Annexe A of this letter.

We are now seeking expressions of interest from Chair and Board members willing to act as a mentor to a graduate student. We would therefore gratefully request that this correspondence is shared with all members of your Board and that anyone interested, or a representative of the Board, is asked to contact the CPANI office using the details below. A response by 8th February 2023 would be much appreciated and would enable us to roll out the programme to this year's new intake of post graduate students.

Should you have any queries about the scheme and what your involvement would entail please do not hesitate to contact the CPANI office.

- E-mail: info@publicappointmentsni.org
- Telephone: 028 905 24820

Yours sincerely

Pat Neeson

Pat Neeson

Principal Business and Policy Adviser

ANNEXE A

Public Appointment Mentoring Scheme

Summary

The purpose of this note is to provide information on the public board mentoring scheme involving graduate students from QUB and UUJ. The mentoring scheme will be administered by the universities and the office of the Commissioner for Public Appointments and would not involve expenditure on the part of the public body.

Background

Representatives from the Graduate School with the QUB approached CPANI in 2016 seeking advice on interaction with public sector Boards with an interest in developing relations with the public sector in Northern Ireland. CPANI is supportive of relationship building between our universities and our public sector and contact with a dynamic and ambitious post graduate school is a positive development. The result of this interaction was the launch of a mentoring scheme which has since been expanded to include students from the Business School of the University of Ulster Jordanstown.

The subject areas across both universities are diverse and many are directly related to the activities of NI Departments and their arms-length bodies. The subject areas include: environmental science, law, social policy, health policies, the economy and education.

This scheme matches graduate student mentees with mentors who are current members of public boards within Northern Ireland. The scheme will involve the mentee meeting on a number of occasions throughout the year with his/her mentor and attendance at a Board meeting included in the arrangement.

Timing and content

It is proposed that the scheme will commence in March 2023, with an initial welcome meeting taking place to launch the scheme and to introduce all mentors and mentees.

The scheme will run for nine months and it is envisaged that mentees will have at least four meetings with their mentor over the course of the scheme along with telephone or online contact. The meetings will provide an opportunity to:

ANNEXE A

- Gain insight in the mentor's roles and responsibilities on the Board.
- Identify relevant skills required for public sector roles.
- Identify potential synergies between the mentee's research and the work of the Board.
- Consider the mentees career goals, identify development areas and potential ways to address these.
- Understanding the role and responsibilities of Boards.
- Understanding Board opportunities and how to apply.

It is highly desirable that mentees attend a number of Board meetings. In addition, a particularly successful aspect of the previous years has been the willingness of mentors to introduce their post graduate student to colleagues within mentors' networks.

CPANI will hold a workshop with mentees at the end of the scheme which will address how to apply for a public appointment along with the responsibilities of a public appointee.

Pharmaceutical Society NI – Council paper

Date: 17 January 2023

Title: Foundation Training Year 2021/22 - Quality Assurance Report

Type of Paper - For Information

Background

Pharmacy is a regulated profession; the Pharmaceutical Society of Northern Ireland (The Society) is the regulator for Pharmacists and registered pharmacy premises in Northern Ireland.

A core aspect of the Education function is to check the standards of programmes and courses that lead to the registration as a pharmacist and annotation as a pharmacist prescriber.

The Society accredits the MPharm degree designed and delivered by both Ulster University and Queens University Belfast, accreditation involves the approval of both these courses.

The Foundation Training Year (FTY) programme is delivered independently of an MPharm degree.

The Foundation Training Year replaced the Pre-Registration Year, the transition and migration over to the FTY took place in 2021. The operation, management and delivery of the Foundation Training Year was handed over to NICPLD (Northern Ireland Centre for Pharmacy Learning and Development) for delivery in 2021/2022 as approved by Council.

IETP Standards: Initial Education and Training of Pharmacists

The new standards for Initial Education and training of Pharmacists were adopted by council in January 2021.

The new standards describe the requirement for a continuum of provision of undergraduate education right through to Foundation training against nine core standards.

The standards make several reforms to the education and training process for Pharmacy Education including the introduction of a Foundation Training Year which along with a reformed MPharm degree will allow graduates to become prescribers upon registration as Pharmacists.

The standards further outline that Statutory Education Bodies (SEBs) are to be delegated responsibility for **Quality Management**. They define that **Quality Control** functions are delegated to the regulator (PSNI/GPhC) providing **Quality Assurance** through the setting of standards and quality assuring the management and delivery of the 5th year of training (Foundation Training Year).

The foundation Training year is subject to the 2021 IETP Standards adopted by Council, those standards are as follows:

Standard 1*: Selection and admission*

Standard 2*: Equality, Diversity and Fairness*

Standard 3*: Resources and Capacity*

Standard 4*: Managing, developing and evaluating Foundation Training Year Programmes*

Standard 5*: Foundation Year Design and Delivery*

Standard 6*: Assessment*

Standard 7*: Support and development for trainee pharmacists and everyone involved in the delivery of the Foundation Training Year*

Standard 8*: The Foundation Training Year*

Standard 9*: The Foundation Training Year Supervision*

By 2025/2026, the Foundation Training Year programmes must have been assessed as meeting all the standards through the Accreditation (approval) process.

In 2025/2026, students completing their Foundation Training Year and passing the Common Registration Assessment will be eligible to apply to join the Register of Pharmacists with the annotation of an independent prescriber.

An assurance framework was approved by council on 26 January 2022. The purpose of the framework being to provide the appropriate level of assurance to council in relation to the operation, management, and delivery of the Foundation Training Year by NICPLD.

The Framework anticipated that a meeting would take place between NICPLD and PSNI to confirm overall final outputs from the Foundation Training Year, to confirm the number eligible to join the Register, to reflect on lessons learned through the delivery of the programme and for NICPLD to update on further development plans associated with the programme.

The Initial Education and Training of Pharmacists Advisory group which is the oversight body for delivery has accepted that the methodology for delivery of the Foundation Training Year may be different in all four jurisdictions (England, Scotland Wales and Northern Ireland) but with the understanding that they all achieve the same standards upon delivery.

This approach applies during this transition period with each country agreeing to full accreditation against all IETP standards in 2025/2026.

Assurance Meeting

The *assurance meeting for the Foundation Training Year operated and delivered by NICPLD took place on the 19th December 2022.*

Colleagues in attendance:

Professor Colin Adair- Postgraduate Pharmacy Dean

Dr Heather Bell- Associate Postgraduate Pharmacy Dean

Laura Hughes- Registrar and Director of Regulation

Mark Neale- Director of Public Affairs

Ryan Duffy- Project Manager

Catherine Shaw- Lead Pharmacist for Foundation Year Training

Wendy Evans- Lead Pharmacist for Foundation Year Training

Mairead Conlon- Lead Pharmacist for Foundation Year Training

A comprehensive presentation was delivered by colleagues in NICPLD detailing the quality management and quality control structures and arrangements in place, this was followed by a Q&A exercise led by PSNI.

The purpose of the meeting was to provide assurance relating to the following areas as detailed below:

Quality Management

Admission to FTY Programme
No. of placements available
No. of educational supervisors available
Discussion regarding adequate numbers to support the project pipeline
System in place to order and track placements and manage changes

Standards for Training

The Foundation Training Programme is underpinned by the Foundation Training Year Standards as approved by Council.

Accreditation/Re-accreditation and update on Training of Educational Supervisors

Recruitment plans
Planned visits in place to support both Educational Supervisors and trainees

Additional Quality Management Processes

CRA outputs

Quality Control

Day to Day delivery of training experience
Supervision
Monitoring support
Feedback Mechanism for Trainees

Lessons Learned

Limitations of using Webinars – limiting the participation of all trainees.
Need to invest more in Educational Supervisors to support effective mentoring.
Investment in the Hospital settings to understand the infrastructure and the effectiveness of the Educational Supervisor/Trainee interface.

Future Developments

Funding in place to continue to develop and expand the NICPLD infrastructure.
Implementing mandatory site visits to each training site.
Plans to enhance the numbers to engage in feedback for both Supervisors and trainees to support future constructive improvements.
Moving to a mandatory evaluation of Educational Supervisors conducted by the trainee

Summary

Appropriate quality management and quality control structures and arrangements are in place and there are no significant issues reported with regard to:

- trainee progression;
- trainee concerns in relation to Fitness to Practise;
- educational supervisors; or with
- governance at training sites.

Both trainees and educational supervisors were well supported by NICPLD throughout the Foundation Training Programme 2021/2022.

We are satisfied that NICPLD conduct regular evaluation and review the feedback from both trainees and educational supervisors.

We are assured that the correct infrastructure is in place to deliver the Foundation Training Year programme as NICPLD have secured funding and expanded their workforce.

For further information -

Laura Hughes
Registrar and Director of Regulation

CORPORATE STRATEGY PROGRESS REPORT - JANUARY 2023					
Objective 1: To deliver high quality pharmacy regulation that is proportionate and cost-effective					
No	**Goals**	**Current Status**	**Tending towards**	**Update - January 2023**	**SMT**
a	We will meet all performance standards in annual PSA appraisals in at least 4 of the next 5 years.			16/17 – Met 24 out of 24 Standards – PSA Report published Feb 2018 17/18 – Met 24 out of 24 Standards – PSA Report published April 2019 18/19 – Met 22 out of 24 Standards – PSA Report published Sept 2020 19/20 – Met 15 out of 18 Standards (PSA introduced revised Standards of Good Regulation) – PSA Report published July 2021 20/21 – Met 17 out of 18 Standards – June 2022 21/22 – PSA to publish PR Report in March 2023.	MM
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).			Policy agreement has not yet been secured with the Department in relation to the following legislative and non-legislative reforms: IETP Reform, Pharmacy Technicians, Premises Standards and Section 60 Orders. The timeframe of May 2023 for an implementation plan for delivery is therefore unachievable.	MM
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. The minister has written to us in June 2022 asking that we aim to commence registration in June 2024. As of 23rd January 2023 we have been advised by the Department that this anticipated registration date has been delayed to Spring 2025 due to legislative timetabling.	MM

CORPORATE STRATEGY PROGRESS REPORT - JANUARY 2023					
Objective 1: To deliver high quality pharmacy regulation that is proportionate and cost-effective					
No	**Goals**	**Current Status**	**Tending towards**	**Update - January 2023**	**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.			Financial Strategy approved by Council in November 2018. Implemented April 2019. Actions reviewed by F&P in Jan 23	JD
e	We will collaborate with other relevant Regulators and PSA to effect change designed to maximise use of shared principles and practices.			We continue our membership of CEORB and partnership working with other regulators. E.g. in light of recent workforce pressures identified we issued a joint statement in december 2022 with GPHC in relation to this.	MM
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 and delivery of standards and guidance around RPs and SPs.			Premises Standards were approved by Council in 2018, as of January 2023 the implementation of the Premises Standards has been further delayed due to the Department requiring an IT solution to carry out inspections using the standards. An estimate of 18 months for this work to be completed has been put forward by the Dept. The two recent Pharmacy Orders commenced on 1st December 2022. We will need to seek agreement with DOH with regards to bringing this work forward.	MM

CORPORATE STRATEGY PROGRESS REPORT - JANUARY 2023					
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 - January 2023**	**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. Compliance indicators regarding Premises Standards have now been agreed, we have been advised by the DOH the IT platform will take 18 months to be implemented. CPD Framework approved and now implemented. Work has commenced on the Code review to be completed in 2023. Thereafterm a review of all standards and guidance will fall into the next corporate strategy period.	MN
b	We will test the ongoing efficacy of pharmacy standards in context of the newly emerging HSC reform programme as part of Goal 2(a).			The HSC reform programme and the impact on Pharmacy service provision remains unclear. However, we continue to liaise with the Strategic Performance and Planning Group of the Department of Health 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 within goal 2(a).	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

CORPORATE STRATEGY PROGRESS REPORT - JANUARY 2023					
Objective 3: To conduct Fitness to Practise processes that are robust, timely and fair					
No	**Goals**	**Current Status**	**Tending towards**	**Update - January 2023**	**SMT**
a	We will improve timeliness, efficiency and cost of Fitness to Practise processes and report on progress made.			We are operating a hybrid model for hearings, we continue to offer both remote and in person hearings as we move out of the challenge that the pandemic offered. We continue to be challenged on efficiency in FTP cases due to time delays with external agencies due to restructure of BSO to SPPG and internal resource pressures with the DOH and associated MRG. In keeping with the financial strategy objectives a review of FTP costings has commenced with a view to meeting the targets set in respect of reducing FTP costs by 5% overall and delivery of 80% of scrutiny cases inhouse.	LH/MN
b	We will ensure regular reports on learning from Fitness to Practise cases are effectively disseminated to pharmacists and other interested parties.			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.			Agreement on legislation needs to be secured with the Department in relation to Pharmacy Technicians prior to any meaningful work in this area being commenced.	LH

CORPORATE STRATEGY PROGRESS REPORT - JANUARY 2023					
Objective 4: To ensure that pharmacy education and professional development is fit for purpose					
No	**Goals**	**Current Status**	**Tending towards**	**Update - January 2023**	**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 now operationally run the Foundation programme as of 2021 intake. The first year of FTY has been completed and work is underway on the remaining actions - including further development on QA.	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 scheduled for February and March 2023 in relation to University sites.	LH
c	We will explore the feasibility of developing a joint education strategy with both NI Universities and GPhC. We will lead on the development of the new IET Standards and their implementation.			Work is led through the ERIG, please revert to 1b in relation to the legislative barrier to this work and timelines being met with regards to the annotation of future registrants as Independent Prescribers.	LH

CORPORATE STRATEGY PROGRESS REPORT - JANUARY 2023					
Objective 4: To ensure that pharmacy education and professional development is fit for purpose					
No	**Goals**	**Current Status**	**Tending towards**	**Update - January 2023**	**SMT**
d	We will review CPD processes and develop a strategy for the establishment of a continuing Fitness to Practise regime. We will undertake to engage with stakeholders in relation to the development of a Continuing Fitness to Practise Strategy.			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 the first year of operation has sinced completed on June 2022. We will begin the engagement work on CFTP now that there is familiarity with new CPD.	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).			The UK wide Post- registration assurance of practice advisory group has been established with representation from both Council and the Registrar, the associated task and finish group will be established in due course, the momentum regarding this agenda appears to have slowed due to competing priorities.	LH

CORPORATE STRATEGY PROGRESS REPORT - JANUARY 2023					
Objective 5: To be an accountable organisation with effective governance and operations					
No	**Goals**	**Current Status**	**Tending towards**	**Update - January 2023**	**SMT**
a	We will establish effective deputising arrangements for the Registrar.			As reported under Goal 1(f), this came into operation in December 2022. Examination of the Deputy Registrar role and how it should be integrated into the PSNI's structure will form part of a wider piece of work looking at our structures, processes and people.	MM
b	We will secure policy agreement with DoH on resolving the current Pharmacy Professional Leadership linkage with the Regulatory function. We will agree a plan to deal with the link between the Leadership and Regulatory functions.			This relates to 1 (b) and, whilst policy agreement with CPO is in place, we await ministerial approval in the current political context. We are also part of a UK Commission on professional leadership in pharmacy established by the 4 CPhOs. This group are expected to report imminently on best practice, recommending the direction of travel for professional leadership bodies.	MM
c	We will annually review audit schedules, risk management processes and performance measurement organisationally and implement necessary changes for improvement.			1 year 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 each of 2020/2021 and 2021/2022 all with satisfactory controls and no priority 1 recommendations. Audit plans underway for 22/23. Our risk register will be reviewed as per update from the Audit and Risk Committee.	MM
d	We will develop a new IT Strategy and deliver against relevant goals, reporting to Performance and Finance Committee at least twice per year.			IT strategy inplemented 2019, Full review completed 2021, approved by Council Nov 2021. Actions reviewed by the Finance & Performance Committee in Jan 2023.	JD

CORPORATE STRATEGY PROGRESS REPORT - JANUARY 2023					
Objective 5: To be an accountable organisation with effective governance and operations					
No	**Goals**	**Current Status**	**Tending towards**	**Update - January 2023**	**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 as per wider piece of work referred to in 5(a).	MM
f	We will formulate and implement a new HR Strategy to improve organisational resilience, efficiency and effectiveness and deliver against relevant goals, reporting to Perfomance and Finance committee at least twice per year.			HR Strategy implemented February 2019. Actions reviewed by the Finance & Performance committee Jan 23.	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. Key issues around recognition of qualifications and recent MHRA approach to PSNI re development of guidance on medicines use in N.I.(NIMAR).			Have met with GPhC and PSI for preliminary discussions on future recognition - have signed a data sharing agreement with PSI. Government policy continues to evolve in this area. BEIS are leading on mutual recognition and we are in contact with them.	MM

CORPORATE STRATEGY PROGRESS REPORT - JANUARY 2023					
Objective 6: To communicate effectively, be accessible and responsive					
No	**Goals**	**Current Status**	**Tending towards**	**Update - January 2023**	**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. We will implement our Communicatons Strategy and			The Comms Strategy has been updated and delivered to Council in Nov 2021 This will be updated in line with the addendum.	MN
c	~~We will develop a "Reach Out" Programme to better engage with the public and pharmacists on regulation (What, Why, When and How).~~			In the current circumstances, further Outreach events by Council have been postponed. Outreach activities will resume once public meetings are permitted.	MN
d	We will review our current public consultation protocols.			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. Due to varying pressures this consultation review has yet to be completed. This will be delivered to Council at the March Council meeting.	MN
e	We will review and improve external and internal complaints processes.			This review has now been completed and revised process has been agreed and approved.	MN

CORPORATE STRATEGY PROGRESS REPORT - JANUARY 2023					
Objective 1: To deliver high quality pharmacy regulation that is proportionate and cost-effective					
No	**Goals**	**Current Status**	**Tending towards**	**Update - January 2023**	**SMT**
a	We will meet all performance standards in annual PSA appraisals in at least 4 of the next 5 years.			16/17 – Met 24 out of 24 Standards – PSA Report published Feb 2018 17/18 – Met 24 out of 24 Standards – PSA Report published April 2019 18/19 – Met 22 out of 24 Standards – PSA Report published Sept 2020 19/20 – Met 15 out of 18 Standards (PSA introduced revised Standards of Good Regulation) – PSA Report published July 2021 20/21 – Met 17 out of 18 Standards – June 2022 21/22 – PSA to publish PR Report in March 2023.	MM
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).			Policy agreement has not yet been secured with the Department in relation to the following legislative and non-legislative reforms: IETP Reform, Pharmacy Technicians, Premises Standards and Section 60 Orders. The timeframe of May 2023 for an implementation plan for delivery is therefore unachievable.	MM
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. The minister has written to us in June 2022 asking that we aim to commence registration in June 2024. As of 23rd January 2023 we have been advised by the Department that this anticipated registration date has been delayed to Spring 2025 due to legislative timetabling.	MM

CORPORATE STRATEGY PROGRESS REPORT - JANUARY 2023					
Objective 1: To deliver high quality pharmacy regulation that is proportionate and cost-effective					
No	**Goals**	**Current Status**	**Tending towards**	**Update - January 2023**	**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 and delivery of standards and guidance around RPs and SPs			Premises Standards were approved by Council in 2018, as of January 2023 the implementation of the Premises Standards has been further delayed due to the Department requiring an IT solution to carry out inspections using the standards. An estimate of 18 months for this work to be completed has been put forward by the Dept. The two recent Pharmacy Orders commenced on 1st December 2022. We will need to seek agreement with DOH with regards to bringing this work forward.	MM

CORPORATE STRATEGY PROGRESS REPORT - JANUARY 2023					
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 - January 2023**	**SMT**
b	We will test the ongoing efficacy of pharmacy standards in context of the newly emerging HSC reform programme as part of Goal 2(a).			The HSC reform programme and the impact on Pharmacy service provision remains unclear. However, we continue to liaise with the Strategic Performance and Planning Group of the Department of Health 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 within goal 2(a).	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

CORPORATE STRATEGY PROGRESS REPORT - JANUARY 2023

Objective 3: To conduct Fitness to Practise processes that are robust, timely and fair					
No	**Goals**	**Current Status**	**Tending towards**	**Update - January 2023**	**SMT**
c	We will develop Fitness to Practise processes for Pharmacy Technicians.			Agreement on legislation needs to be secured with the Department in relation to Pharmacy Technicians prior to any meaningful work in this area being commenced.	LH

CORPORATE STRATEGY PROGRESS REPORT - JANUARY 2023					
Objective 4: To ensure that pharmacy education and professional development is fit for purpose					
No	**Goals**	**Current Status**	**Tending towards**	**Update - January 2023**	**SMT**
c	We will explore the feasibility of developing a joint education strategy with both NI Universities and GPhC. We will lead on the development of the new IET Standards and their implementation.			Work is led through the ERIG, please revert to 1b in relation to the legislative barrier to this work and timelines being met with regards to the annotation of future registrants as Independent Prescribers.	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).			The UK wide Post- registration assurance of practice advisory group has been established with representation from both Council and the Registrar, the associated task and finish group will be established in due course, the momentum regarding this agenda appears to have slowed due to competing priorities.	LH

CORPORATE STRATEGY PROGRESS REPORT - JANUARY 2023					
Objective 5: To be an accountable organisation with effective governance and operations					
No	**Goals**	**Current Status**	**Tending towards**	**Update - January 2023**	**SMT**
b	We will secure policy agreement with DoH on resolving the current Pharmacy Professional Leadership linkage with the Regulatory function. We will agree a plan to deal with the link between the Leadership and Regulatory functions.			This relates to 1 (b) and, whilst policy agreement with CPO is in place, we await ministerial approval in the current political context. We are also part of a UK Commission on professional leadership in pharmacy established by the 4 CPhOs. This group are expected to report imminently on best practice, recommending the direction of travel for professional leadership bodies.	MM

CORPORATE STRATEGY PROGRESS REPORT - JANUARY 2023					
Objective 6: To communicate effectively, be accessible and responsive					
No	**Goals**	**Current Status**	**Tending towards**	**Update - January 2023**	**SMT**
d	We will review our current public consultation protocols.			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. Due to varying pressures this consultation review has yet to be completed. This will be delivered to Council at the March Council meeting.	MN