

Consultation on the draft 2020 fees rules

January 2020



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About the GPhC

Who we are

We regulate pharmacists, pharmacy technicians and pharmacies in Great Britain.

We work to assure and improve standards of care for people using pharmacy services.

What we do

Our role is to protect the public and give them assurance that they will receive safe and effective care when using pharmacy services.

We set standards for pharmacy professionals and pharmacies to enter and remain on our register.

We ask pharmacy professionals and pharmacies for evidence that they are continuing to meet our standards, and this includes inspecting pharmacies.

We act to protect the public and to uphold public confidence in pharmacy if there are concerns about a pharmacy professional or pharmacy on our register.

Through our work we help to promote professionalism, support continuous improvement and assure the quality and safety of pharmacy.



Overview

Parliament has given us a responsibility to make sure we have the financial resources to carry out our regulatory role and fulfil our statutory duties.

As part of our long-term financial strategy we are looking at ways to reduce our costs, become more efficient, use our reserves more effectively, and make sure that those being regulated are paying an appropriate amount in fees, as well as exploring other possible sources of income.

When we review our fees, we always carry out a strategic analysis to decide whether we have the funds we need to cover the cost of regulation. When we were set up, Parliament decided that the people and organisations being regulated must bear the costs directly. So, at the GPhC we look at how much it costs to regulate each registrant group and set separate fees for each group, based on those costs.

Pharmacy professionals and pharmacy owners benefit from effective regulation since it reassures patients and the public that they can have confidence in the pharmacy services they receive. We are mainly funded by the fees paid by pharmacists, pharmacy technicians and registered pharmacies, with a small amount of income from the fees we charge to education providers. To continue to be an effective regulator whose aim is to protect the public, we need to make sure that those we regulate are paying the appropriate fees to help pay for that regulation.

To make sure the fees are appropriate, we use a 'cost allocation model'. This makes it clear how much our individual activities cost and provides a framework for discussions about the setting of fees.

Fees for pharmacy premises

Based on 2018/19 figures, the cost of regulating each pharmacy premises is now £365 a year. Regulation for this group includes:

- inspections (including the support and infrastructure costs to allow our inspection team to carry out their work)
- re-inspections when needed
- developing an enforcement policy
- initial registration inspections
- strategic relationship management
- relevant registration and renewal activities
- a share of the infrastructure and support costs of running the GPhC

The fees paid by pharmacy owners have not kept pace with the costs of regulating pharmacies. This is not sustainable.

We are therefore proposing to increase the registration and renewal fees for pharmacy premises by £103 – from £262 to £365. We are asking for your views on proposals about whether the fees for pharmacy premises should be charged according to how much it costs to regulate them.

Fees for pharmacy professionals

There are no plans to increase fees for pharmacy professionals as part of this consultation.

But we are also using this consultation document to tell registrants that we will be exploring further changes to all our fees as part of our long-term fees' strategy. This includes exploring:

- the possibility of setting fees for all registrant groups over a longer period; for example, by linking to inflation over a three-year period or setting fees to increase each year by a certain, fixed percentage over a three-year period
- whether we could have more flexible fee options, including considering the cases for and against different fees for some registrants – for example, those on parental leave – and the extra costs and other implications of this
- a scale of fees for premises based on their type, turnover or other size measures
- the possibility of charging directly for additional regulatory activities – for example, re-inspections

In this first phase of the consultation, we are consulting from 7 January 2020 to 31 March 2020 on proposed changes to our registration and renewal fees for registered pharmacies.



The consultation process

Our governing council has carefully examined a range of information and evidence while considering this consultation. We want to test our thinking and the Council want to make their decisions about fees using the best information available, when they meet to discuss the responses to this consultation in June 2020.

The consultation will run for 12 weeks and will close on 31 March 2020. During this time, we welcome feedback from individuals and organisations. This consultation document will be sent to a range of stakeholders including pharmacy professionals, pharmacist prescribers, pharmacy owners, professional representative bodies and employers, patients and their representative bodies, and others with an interest in this area.

We welcome responses to this consultation from everyone who has information and views. This will help us test our overall approach to fee setting, as well as the specific proposals. It will also help us assess the potential impacts or benefits of specific fee levels.

After the consultation, we will publish a report summarising what we heard.

Our report on this consultation

Once the consultation period ends, we will analyse the responses we receive and consider any changes that are needed.

The Council will consider making the 2020 fees rules at its meeting in June 2020 and, if the Council approves them, the rules will come into force in October 2020.

We will publish a summary of the responses and an explanation of the decisions we take. You will be able to see this on our website

www.pharmacyregulation.org

Why we consult

We are required to consult before we set any standards or requirements under the Pharmacy Order 2010. We will also consult where necessary to make sure we exercise our statutory functions effectively and proportionately to meet our overarching objective of protecting the public.

Responding to the consultation

How we use your information

We will use your response to help us develop our work. We ask you to give us some background information about you and, if you respond on behalf of an organisation, your organisation. We use this to help us analyse the possible impact of our plans on different groups. We are committed to promoting equality, valuing diversity and being inclusive in all our work as a health professions regulator, and to making sure we meet our equality duties. There is an equality monitoring form at the end of the survey. You do not have to fill it in, but if you do, it will give us useful information to check that this happens.

How we share your information

If you respond as a private individual, we will not use your name or publish your individual response. If you respond on behalf of an organisation, we will list your organisation's name and may publish your response in full unless you tell us not to. If you want any part of your response to stay confidential, you should explain why you believe the information you have given is confidential.

We may need to disclose information under the laws covering access to information (usually the Freedom of Information Act 2000). If you ask us to keep part or all of your response confidential, we will treat this request seriously and try to respect it but we cannot guarantee that confidentiality can be maintained in all circumstances.

If you email a response to the consultation and this is covered by an automatic confidentiality disclaimer generated by your IT system this will not, in itself, be binding on the GPhC.

Your rights

Under data protection law, you may ask for a copy of your response to this consultation or other information we hold about you, you may also ask us to delete your response. For more information about your rights and who to contact please read our privacy policy on our website.

How to respond

You can respond to this consultation by going to:

www.pharmacyregulation.org/consultation-draft-2020-fees-rules and filling in an online survey there.

We encourage respondents to use the online questionnaire. However, if you want to send a response by email, please write your response to the consultation questions and send it to us at consultations@pharmacyregulation.org

Other formats

Please contact us at communications@pharmacyregulation.org if you would like a copy of the consultation survey in another format (for example, in larger type or in a different language).

Comments on the consultation process itself

If you have concerns or comments about the consultation process itself, please send them to:

feedback@pharmacyregulation.org

or post them to us at:

Governance Team
General Pharmaceutical Council
25 Canada Square
London E14 5LQ

Please do not send consultation responses to this address.

Details of proposals and context

Part 1: Changes to the registration and renewal fees for pharmacy premises¹

Introduction

Registered pharmacies provide vital pharmacy services and access to medicines which ensure the health, safety and wellbeing of people. There is a growing demand for healthcare and this has led to extra pressures. These include challenges in meeting NHS priorities, as laid out in the NHS Long Term Plan for England; in Scotland, the Health and Social Care Delivery Plan, and The Healthcare Quality strategy for NHS Scotland; and in Wales, A Healthier Wales. Because of these pressures on pharmacy, we only propose fee increases when we need to, so that we can continue to meet our statutory responsibilities.

In the last 10 years, premises fees have only been raised three times:

- 2011/12
Fee rise from £217 to £221
- 2015/16
Fee rise from £221 to £241
- 2019/20
Fee rise from £241 to £262

We have been able to avoid other fee increases by improving our efficiency and by using our financial reserves to cover the gap between our income and our outgoings.

The fees paid by the owners of pharmacy premises have not kept pace with the costs of

regulating pharmacies. Instead, we have covered these costs using our reserves. We have done this partly because of the challenges facing pharmacy services, but also because our reserves had risen for a time and we could afford to do this.


At the moment, the amount being underpaid by the owners of pharmacy premises is slightly over £103 for each pharmacy. Our long-term financial analysis shows that making up this deficit from our reserves is not a sustainable financial option. For four out of the last five years we have made an overall financial loss.

We are therefore proposing to increase the registration and renewal fees for pharmacy premises by £103 – from £262 to £365. We are asking for your views on proposals about whether the fees for pharmacy premises should be charged according to how much it costs to regulate them.

We are consulting on an increase to fees for registered pharmacy premises which will take effect from October 2020. The fee changes we propose are based on the need to close the gap between the costs of regulating pharmacies and the fees we charge to pharmacy premises.

However, the increase we are proposing does not take into account future rises in regulatory

¹ There are no plans to increase fees for pharmacy professionals as part of this consultation.



costs. Therefore, we will continue to carry out regular reviews of registration and renewal fees for pharmacy premises. This is to make sure that fees for premises will, in the future, continue to be charged according to the amount it costs to regulate them. Reviews will include exploring the possible introduction of an extra fee for pharmacies that need much higher levels of regulation.

1. About our fees

Parliament decided that the cost of pharmacy regulation should be paid by those who are regulated. This is set out in law. It means that pharmacists, pharmacy technicians and the owners of registered pharmacies pay for our work to assure the public that the services they receive are safe.

Our powers to charge fees and change the level of fees for registrants and registered pharmacies come from our governing legislation, the Pharmacy Order 2010. We set out fees in our fees rules – **The General Pharmaceutical Council (Registration and Renewal Fees) (Amendment) Rules**.

If we want to change our fees, the law says we must consult with the people and organisations that pay them.

It takes time for us to consult on, agree and implement new fees, and even longer for the income to be received. That means we need to act now to make sure we have enough funds to carry out our regulatory work in the future. We are working on a long-term fee strategy so that both we and our registrants are able to plan long term instead of on a yearly cycle.

You can see our fees policy in Annex 1.

You can see a draft of our proposed amendments to our fees rules in Annex 2.

You can read more about the fees rules on our website.

2. Why we need to make changes to premises fees

By continuing to improve our efficiency and by using some of our financial reserves to cover the gap between our income and our expenditure, we have not increased our fees significantly or regularly in recent years. Using our reserves in this way is not sustainable now or in the long term.

We plan to carry out our role and achieve our aims in a sustainable way by:

- continuing to reduce our costs by working as efficiently as we can, including by investing in service improvements when this is appropriate
- making best use of our financial reserves
- keeping our fee structures and fee levels under review

Developments in the regulation of registered pharmacies

In the last few years we have been developing our inspection approach against a set of standards for registered pharmacies. This has included: developing and writing inspection reports for all pharmacies inspected; checking action plans for pharmacies who have not met standards; and using our enforcement powers

when we need to. We have also seen new service models developed in pharmacy and the need for further guidance to help make sure standards are met.

Our new approach will help us to provide greater assurance to the public that pharmacy services are safe and effective, regardless of how they are organised and delivered. We have used our reserves to pay for the work to develop the new approach to regulating and inspecting registered pharmacies.

The regulation of pharmacy premises over the last few years has increased our workload and costs in a number of areas. Based on present trends, we expect there to be more increases in the future (although this is difficult to predict accurately).

Other increases in our workload and potential costs include:

- publishing inspection reports
- developing the knowledge hub² on our pharmacy inspections website
- an increase in the number of ways pharmacy services are delivered, including at a distance and online. Some of these methods of delivery carry extra risks for patient safety

We need enough income to be able to respond effectively to potential developments, so we can continue to protect patients and meet our regulatory responsibilities.

² Our **online 'knowledge hub'** gives the pharmacy team examples of notable practice we have found during pharmacy inspections.

Cost recovery

The fees paid for pharmacy premises have not kept pace with the costs of regulating pharmacies. Based on 2018/19 figures, the cost of regulating each pharmacy premises is £365 a year. Regulation for this group includes:

- inspections (including the support and infrastructure costs to allow our team to carry out their work)
- re-inspections when needed
- developing an enforcement policy
- initial registration inspections
- strategic relationship management
- relevant registration and renewal activities
- a share of the infrastructure and support costs of running the GPhC

Cost allocation model

To work out the costs, we use a 'cost allocation model'. The model allocates spending by – firstly – our statutory roles. These are:

- education
- standard setting
- registration
- inspection
- fitness to practise

Spending in each of these areas covers our occupancy costs, and those of our support and operational areas. Then, secondly, the model allocates expenditure by registrant groups:

The knowledge hub highlights examples of excellent, good and poor practice and is regularly updated.

- pharmacists
- pharmacy technicians
- pharmacies

What spending is allocated will depend on various things. These include registrant volumes, the number of hearing days for each registrant group, and the length of inspections and re-inspections. The total costs for each registrant group are then spread evenly across the number of registrants within each individual group. This gives us a proposed ‘fee per registrant’.

The cost allocation model makes it clear how much our individual activities cost, and provides a framework for discussions about the setting of fees. We review and refine the model from time to time, to make sure it is complete and accurate. (See Annex 3 for more detailed information on how we have worked out the cost of regulating registered pharmacies.)

Business impact assessment

We commissioned consultancy firm EY to carry out a business impact assessment. This was to help us understand the impact of the proposed fee increase on the financial position of pharmacies and on their ability to keep providing safe and effective pharmacy services. The **full report is available on our website**.

The findings from EY show that our suggested increase in fee levels would not have a significant impact on the financial performance of pharmacies. The report did highlight that the pharmacy sector, as is well known, is showing some financial fragility (a number of pharmacies are making losses). However, the impact of the proposed fee increase is very small in terms of present financial performance.

Even so, because of the present financial fragility of the pharmacy sector, in our long-term fees strategy we will be looking at whether we should set different fees for different segments of the sector. We will consider whether the fees for pharmacy premises can be more effectively structured to take account of the growing complexity and diversity of pharmacy provision. The EY report suggests alternative models for premises-related fees in the future. For example, these could be based on prescription volumes or the range of services offered.

Looking at regulation, inspection and accreditation in other sectors, the EY findings show that there is a high value placed on regulation. The perceived benefits include providing easier access to markets and improved consumer confidence.

Comparison with other regulators

As a comparison, we have also considered how other regulators have set their fees. The table below summarises the fees other regulators with similar responsibilities charge.

Regulators charge different types of fees and have different renewal periods, so it is not always possible to make a direct comparison. The fee amounts shown are for full annual registration renewal.

In the following table, for premises regulators, we have chosen examples that are as similar an environment as possible to a registered pharmacy. The tables are in fee order from the highest to the lowest renewal fee per year.

Comparison of annual renewal fees charged by regulators

Regulator	Renewal fee for premises	Type of premises
Health Improvement Scotland	£992	independent clinics carrying out non-surgical procedures
Care Quality Commission 2019/2020	£598	a dental practice with one chair
General Pharmaceutical Council (proposed fees)	£365	a registered pharmacy premises
Health Inspectorate Wales	£300	a dental practice with one dentist
Pharmaceutical Society of Northern Ireland	£155	for a registered pharmacy premises ³

Even with the £103 increase, the GPhC renewal fee for premises compares favourably with the fees set by other regulators.

3. Our long-term financial strategy

Five years ago, the GPhC decided that we were keeping our reserves at too high a level. We decided to reduce the level in a number of ways, including restricting the rise in registration and renewal fees for a limited amount of time. Instead we covered the rising costs of regulation from our reserves.

Financial deficits in four out of the last five years have reduced our reserves level as originally intended. Although we could afford this approach in the short term (because our

reserves were big enough), this is no longer the case. Our most recent financial review has shown that we cannot continue to cover registration and renewal fees. Therefore, we have decided to consult on proposed increased fees for registered premises in 2020, so that they are paying a fee which more accurately reflects the cost of their regulation. **Annex 3 shows how we work the fee out.**

We are continuing to develop our long-term financial strategy to make sure that we are a financially stable and sustainable organisation, which:

- is funded appropriately by those we regulate, and

³ It is important to note that the Pharmaceutical Society of Northern Ireland does not inspect pharmacy premises; in Northern Ireland the Department of Health carries out inspections.

- makes the best use of resources

This financial planning will make sure that the GPhC is able to fund regulation at the right level in the future.

The key parts of our long-term financial strategy include:

- responding to what we find out about how changes in pharmacy may affect our income and costs
- planning, prioritising and funding investment in our systems and processes
- making sure that we continue to improve our efficiency and effectiveness across all areas of the GPhC, including through our organisation design and accommodation strategies
- implementing an investment strategy to get the most income we can from other sources
- maintaining sound financial controls
- aligning the financial strategy with the GPhC strategic plan
- the possibility of setting fees for all registrant groups over a longer period – for example, by linking to inflation over a three-year period or setting fees to increase each year by a certain, fixed percentage over a three-year period
- exploring whether we could have more flexible fee options, including considering the cases for and against different fees for some registrants – for example, those on parental leave – and the extra costs and other implications of this
- a scale of fees for premises based on type, turnover or other size measures

- the possibility of charging directly for additional regulatory activities – for example, re-inspection

In the short term, the GPhC needs to close the gap between the cost of regulating pharmacy premises and the fees collected to cover that regulation.

However, one of the reasons for this consultation is to give our registrants notice that our financial review and long-term strategy will lead to further proposals for changes to our fees in the future. These may include additional increases. The review will include all registrant groups, and we will consult on any changes.

Part 2: Consultation questions on changes to the registration and renewal fees for pharmacy premises

We are proposing to increase the registration and renewal fees for pharmacy premises by £103, from £262 to £365.

At the GPhC we use a cost allocation model. This allocates expenditure according to our statutory roles (what we have to do), and the cost of regulating each registrant group (pharmacists, pharmacy technicians, and premises). This makes it clear how much it costs to regulate each of these registrant groups and gives us information to use for any review of fees.

The £103 increase in fees for pharmacy premises has been based on how much they cost to regulate, and the shortfall between that figure and the amount they now pay in fees.

Our review included an analysis of:

- the present fees paid by all registrant groups
- the regulatory work we know we need to do in the coming year, and
- the likely gap between our forecast budget and what our income would be if fees for premises stay the same

We welcome your views on the following questions. Please go to:

<https://surveys.pharmacyregulation.org/s/gphc-draft-2020-fees-rules> to fill in the online survey.

Consultation questions

We are proposing to increase the registration and renewal fees for premises by £103, from £262 to £365. The increase is based on the difference between the present fee for premises and the cost of regulating pharmacy premises according to our cost allocation model.

1. **Do you agree or disagree that the increase in fees for pharmacy premises should be the difference between the amount they now pay in fees (£262), and the amount they cost to regulate (£365)?⁴**
2. **What is the reason for your answer?**

Over the next two years, as part of our long-term fees strategy, we will be exploring changes to our fees for all our registrant groups. This will include looking at:

- setting fees for all registrant groups over a longer period; for example, by linking to inflation over a three-year period or setting fees to increase each year by a certain, fixed percentage over a three-year period
- whether we could have more flexible fee options, including considering the cases for and against different fees for some registrants – for example, those on parental leave
- different fees for premises based on their type, turnover or other size measures

⁴ The £365 cost of regulation for pharmacy premises was worked out in October 2019 and is based on 2018/19 data.



- the possibility of charging for additional regulatory activities – for example, re-inspection
- 3. Do you think these are the right areas to look at in the future?**
- 4. Please explain your answer and tell us about any other areas you think we should look at as part of our long-term fees strategy.**
- for example, patients, pharmacy owners or pharmacy staff.
- 6. Do you think our proposals will have a positive or negative impact on any other individuals or groups?**
- 7. Please give comments explaining your answers to questions 5 and 6 above. Please describe the individuals or groups concerned and the impact you think our proposals will have.**

Equality impact

We want to understand whether our proposals may have a positive or negative impact on any individuals or groups sharing any of the protected characteristics in the Equality Act 2010. The protected characteristics are:

- age
 - disability
 - gender reassignment
 - marriage and civil partnership
 - pregnancy and maternity
 - race/ethnicity
 - religion or belief
 - sex
 - sexual orientation
- 5. What type of impact do you think our proposals will have on individuals or groups who share any of the protected characteristics?**

We also want to know if our proposals will have any other impact on any other individuals or groups (not related to protected characteristics)

Annex 1: Our fees policy

1. The fees we set must cover the costs of delivering our regulatory functions and ensure the financial resilience of the organisation so that pharmacy standards can continue to be maintained.
2. We will allocate revenues generated from fees in a way which enables us to meet our statutory purpose and regulatory functions, avoiding 'regulatory creep', where standards, guidance and regulation can become complex, unclear, confusing or contradictory.
3. We will set fees for different registrant groups in a way which considers a range of factors including: costs of regulation; relative risk factors where known; and comparable fees for other regulated professional groups. We are committed to considering these factors, but recognise that, given the complexity of these issues, there is no 'perfect' formula for decision making.
4. We will balance the above factors with the need to minimise complexity in our fees structure, which can increase costs overall.
5. We will ensure we consider external factors, including economic factors, when setting fees, alongside the need to carry out our statutory functions effectively.
6. We will periodically review these principles and ensure that we set out clearly any significant change in factors which either allows us, or requires us, to reduce or increase fees in future.
7. We will continually strive to identify efficiencies in our regulatory operations and set these out when consulting on fees.
8. We will seek, through effective future planning and consideration of external economic factors, to avoid large fluctuations in fees, up or down, in future years.

Annex 2: Draft fees rules

The General Pharmaceutical Council (Registration and Renewal Fees) (Amendment) Rules 2020

The General Pharmaceutical Council has made these Rules in exercise of the powers conferred by articles 36(1) of the Pharmacy Order 2010⁽⁵⁾.

In accordance with those provisions, the General Pharmaceutical Council has consulted such persons and organisations as it considered appropriate, including the persons and organisations listed in article 36(6)(a) to (d) of that Order.

Citation and commencement

1.—(1) These Rules may be cited as the General Pharmaceutical Council (Registration and Renewal Fees) (Amendment) Rules 2020.

(2) These Rules come into force on *[insert date]*.

Amendment of the General Pharmaceutical Council (Registration and Renewal Fees) Rules 2015

2. The Schedule to these Rules amends the General Pharmaceutical Council (Registration and Renewal Fees) Rules 2015⁽⁶⁾—

- (a) to increase the amount of the fee payable on the grant of an application for the entry of premises in Part 3 of the Register; and
- (b) to increase the amount of the fee payable on the renewal of any such entry.

Given under the official seal of the General Pharmaceutical Council *[insert date]*.



Nigel Clarke

Chair

Duncan Rudkin

Chief Executive and Registrar

⁽⁵⁾ S.I. 2010/231.

⁽⁶⁾ The General Pharmaceutical Council (Registration and Renewal Fees) Rules 2015 were amended by the General Pharmaceutical Council (Registration and Renewal Fees) (Amendment) Rules 2019.

SCHEDULE

Amendments to the General Pharmaceutical Council (Registration and Renewal Fees) Rules 2015

Amendment of rule 26

1. In rule 26 (entry in Part 3 of the Register following the grant of an application), for “£262” substitute “£365”.

Amendment of rule 29

2. In rule 29(1) (renewal of an entry in Part 3 of the Register), for “£262” substitute “£365”.

Annex 3: How we work out the fee for pharmacy premises

It is important that we are transparent about how we have used the income from our fees, and about the activities we are planning in future to carry out our statutory role of protecting the public.

All our income is spent on carrying out, or directly supporting, our main work. You can **find more detailed information in our annual report and accounts**.

Our Council makes its decisions about the organisation's budget in meetings that are open to the public, and you can see detailed financial information on our website.

This is how the fee for the regulation of registered pharmacies has been worked out:

The cost allocation process

Figure 1 - Cost allocation process



We have been using a 'cost allocation model' so there is a clear understanding of costs, broken down by each of the registrant groups and by each of our statutory roles. We used external consultants to evaluate the model – to make sure it was fair and appropriate – and we have used it to review fee levels during each year.

How the model allocated costs for 2018/19

In 2018/19 the total spending was £23.8m. We used the model to allocate the spending across our statutory roles and between the different registrant groups.

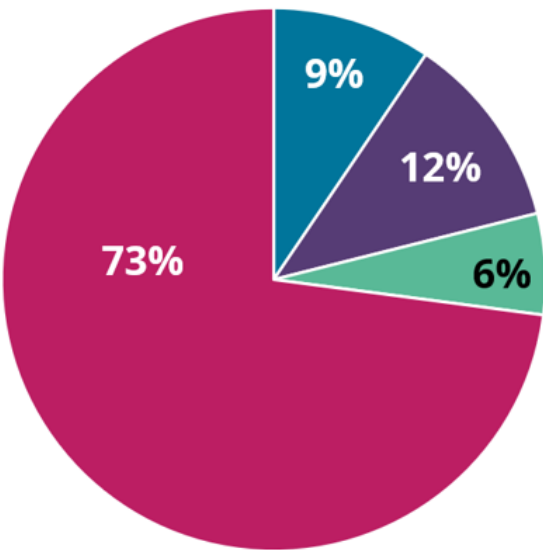
Registrant group	Amount (£000's)
Pharmacists	15,589
Premises	5,186
Pharmacy technicians	3,047
Total	23,822

The cost of regulating registered premises

The activities involved in regulating premises include:

- inspections, re-inspections and initial registration inspections
- developing and implementing standards and guidance
- administration for registrations and annual renewals
- strategic management and quality assurance

Figure 2 - Cost by activity: premises



- Registration and renewal
- Policy and standards development
- Quality assurance and concerns
- Inspecting premises

Comparing income and spending

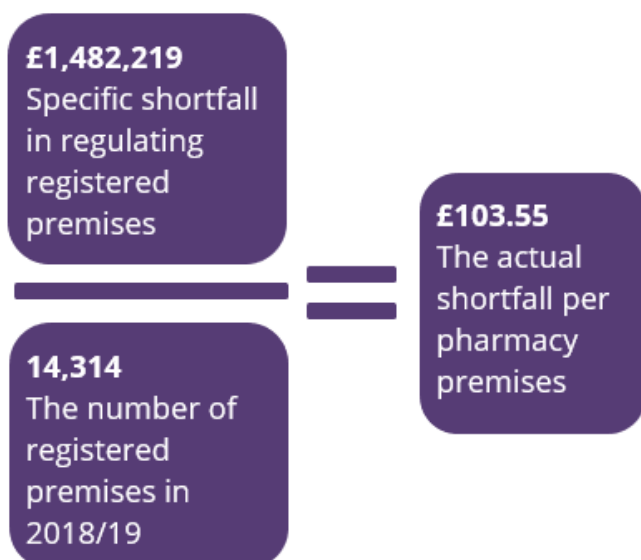
Figure 3 - Cost of regulating premises versus income (£000's)



At the moment, the costs of regulation in this area are far higher than the income we receive. This is a position that has been carried for several years by using our reserves to make up the difference.

This position is not sustainable, with the growth in clinical services and activities such as the new approach to inspections, and online inspection reports. We also need to keep up our investment in developing our supporting infrastructure.

Figure 4 - The shortfall per pharmacy premises





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