## General Pharmaceutical Council



# **Council meeting**

16 May 2019

14:00 to 15:30 **approx.** Council Room 1, 25 Canada Square, London E14 5LQ

## **Public business**

1.	Attendance and introductory remarks	Nigel Clarke
2.	Declarations of interest	
	Public items	All
3.	Minutes of last meeting	
	Public session on 11 April 2019	Nigel Clarke
4.	Actions and matters arising	Nigel Clarke
5.	Workshop summary	Nigel Clarke
6.	Review of policies and procedures	19.05.C.01
	For approval	Laura McClintock
7.	Council recruitment 2020	19.05.C.02
	For agreement and noting	Laura McClintock
8.	Update on Gosport and the Williams Review	19.05.C.03
	For noting	Laura McClintock
	For noting	Laura McClintock

onfic	lential business	
9.	Declarations of interest Confidential items	All
10.	Minutes of the last meeting Confidential session on 11 April 2019	Nigel Clarke
11.	Confidential actions and matters arising	Nigel Clarke
12.	Any other confidential business	Nigel Clarke

## Date of next meeting

Thursday, 13 June 2019

## General Pharmaceutical Council



Minutes of the public session

Minutes of the Council meeting held on Thursday 11 April 2019 at 25 Canada Square, London at 14:00

### TO BE CONFIRMED 16 May 2019

### Present

Nigel Clarke (Chair) Neil Buckley Digby Emson Mark Hammond Penny Hopkins Ann Jacklin Jo Kember

### Apologies

### None

### In attendance

Duncan Rudkin (Chief Executive and Registrar) Carole Auchterlonie (Director of Fitness to Practise) Claire Bryce-Smith (Director of Insight, Intelligence and Inspection) Laura McClintock (Chief of Staff) Francesca Okosi (Director of People) Mark Voce (Director of Education and Standards) Jonathan Bennetts (Associate Director of Finance and Procurement) Osama Ammar (Head of Continuing Fitness to Practise) Annette Ashley (Head of Policy and Standards) Janet Collins (Governance Manager)

## Alan Kershaw Elizabeth Mailey Rima Makarem Evelyn McPhail Arun Midha Aamer Safdar

Jayne Salt

### 1. Attendance and introductory remarks

- 1.1 The Chair welcomed all present to the meeting and in particular the new Council members Neil Buckley, Penny Hopkins, Ann Jacklin, Rima Makarem and Aamer Safdar.
- 1.2 Jonathan Bennetts, who had joined the GPhC as the Associate Director of Finance and Procurement, was introduced.
- 1.3 This was the last meeting for Matthew Hayday, the Head of Governance who had also served as Interim Director of Fitness to Practise and was leaving the GPhC after seven years. The Chair and Council thanked Matthew for all his work.

### 2. Declarations of interest

2.1 Council agreed that members would make any declarations of interest before each item.

### 3. Minutes of the last meeting

- 3.1 The minutes of the public session held on 7 March 2019 were confirmed as a fair and accurate record and signed by the Chair.
- 3.2 Council agreed that clear timelines for the development of a policy on differential fees (paragraph 113.6 ii of the minutes) should be added to the action log.

### 4. Actions and matters arising

- 4.1 Claire Bryce-Smith (CB-S) updated the Council on action 99.12 from February 2019 with reference to the information and intelligence flow between Controlled Drugs Accountable Officers and the GPhC.
- 4.2 GPhC Inspectors attended Local Intelligence Network meetings and shared concerns arising from inspections in between meetings if necessary. Information also flowed the other way. Local relationships were good and the information flows worked well. The sharing of any information was recorded on the inspection system. The GPhC was also an active member of national groups on controlled drugs.
  - 4.3 Action 100.2 was underway and would be reported back to the June meeting.

### 5. Workshop summary – 7 March 2019

### 5.1 **Council noted the discussions from the March workshop.**

### 6. Guidance for registered pharmacies providing services at a distance, including online

- 6.1 Annette Ashley was in attendance for this item. Mark Voce (MV) introduced 19.04.C.01 which reported on the feedback from a discussion paper on making sure that patients and the public obtained medicines and other pharmacy services safely online and the implications of this through revised guidance.
- 6.2 Advances in technology and the development of new service models had brought opportunities to deliver pharmacy and other healthcare services in new ways. Guidance had been produced in 2015 but this was a fast-moving sector and had changed since that time. Providing pharmacy services at a distance and especially online carried particular risks which needed to be managed and there was increasing concern about the way in which some services appeared to undermine the important safeguards which protected patients from accessing medicines which were not clinically appropriate.
- 6.3 The discussion paper set out how the GPhC planned to strengthen the existing guidance for the owners of online pharmacies based in Great Britain to help make sure that patients could access medicines safely and effectively online.
- 6.4 The paper, which was available for eight weeks between June and August 2018 and prompted 797 responses, proposed that online pharmacies should be required to put safeguards in place in the following areas:
  - transparency and patient choice;
  - making sure that medicines were clinically appropriate for the patient;
  - further safeguards for certain categories of prescription only medicines; and
  - regulatory oversight making clear that if a pharmacy owner chose to work with prescribers or prescribing services operating lawfully outside the UK, they must manage any additional risks.
- 6.5 An analysis of the feedback was presented, together with revised guidance incorporating feedback from the discussion paper.
- 6.6 Members welcomed the updated guidance and made some comments which were taken into account in producing the final version, including:
  - the removal of some duplication;
  - changes to some of the examples; and

- clearer reference to medicines being used off-licence.
- 6.7 In response to a question about the possible impact of the guidance on costs for pharmacies, it was noted that this had not featured significantly in the consultation feedback and that implementation of the guidance should not increase costs above the levels that businesses would already be incurring if they were dispensing medicines safely.
- 6.8 Members discussed the requirement to be clear about who was the responsible pharmacist at any given time. Responses to the consultation had suggested that this would not be possible in an online environment as it would change frequently. However, the Council was of the view that this was necessary information for patient and agreed that the guidance should include a requirement for there to be log of responsible pharmacists, as was required in physical premises.
- 6.9 It was noted that a significant public education effort was needed around obtaining medicines online and that, while the GPhC should be a part of that, it could not do it alone. The publication of the guidance would be accompanied by information aimed at the public, including information on how to check the registrations of online pharmacies.
- 6.10 The revised guidance would be circulated to members before publication.

### 7 Finance and Planning Committee

- 7.1 Laura McClintock (LM) introduced **19.04.C.02**, which proposed that the Efficiency and Effectiveness Assurance and Advisory Group (EEAAG) should become the Finance and Planning Committee (FPC) and set out suggested terms of reference for the committee.
- 7.2 The proposed extension to the committee's scope and remit was particularly in relation to supporting the Council by overseeing and monitoring the implementation of the GPhC's investment strategy and policy. The terms of reference had been updated accordingly.
- 7.3 The committee would retain the EEAAG's responsibility for overseeing the ongoing improvements in organisational efficiency and effectiveness. This was clarified in the new terms of reference which specified that the committee was responsible for overseeing both business and financial planning to ensure that they aligned with the overall strategy set by the Council.
- 7.4 Council agreed that the Efficiency and Effectiveness Assurance and Advisory Group should become the Finance and Planning Committee and approved the terms of reference for the committee.
- 8. Ten-year vision

- 8.1 Duncan Rudkin (DR) presented **19.04.C.03**, which updated Council on the progress in developing an overarching 10-year vision and sought approval to begin a period of broader external engagement to inform its finalisation.
- 8.2 Part of the idea behind the 10-year vision was to build internal and external understanding of what the GPhC was trying to achieve. Given both the scope and pace of change in pharmacy practice and more widely, the need for clarity about where the organisation wanted to be became increasingly important if it was not to be buffeted by every change (while always keeping the vision under review to ensure that it remained relevant). One of the contextual pieces around the vision would be a logic model showing how regulation was intended to deliver benefits.
- 8.3 The vision was not being put out for consultation the idea was that discussing it with stakeholders in various types of engagement would allow the GPhC to see whether it resonated with them and also give some context to the ways in which the organisation wanted to change the regulation of pharmacy. It was important to note that the wording was not finalised and that this would happen after the discussions with stakeholders. Most of these would take place via existing opportunities and events.
- 8.4 It was agreed in discussion that the vision should now be referred to as "Vision 2030".
- 8.5 **Council noted the progress on the development of the 10-year vision and agreed that work should begin on external engagement.**

### 9. Joint statement on reflective practice

- 9.1 Osama Ammar (OA) presented **19.04.C.04** which provided the joint statement from the Chief Executives of the statutory regulators of health and care professionals on the benefits of reflective practice.
- 9.2 Reflective practice was part of the GPhC's model for revalidation for pharmacy professionals. However, there had been concern around the Williams Review into gross negligence manslaughter in healthcare that reflective records could be compelled for submission in fitness to practise proceedings. The Review had recommended that the regulators form a clear and consistent position on the use of such records.

ACTION: OA to ask the other regulators to consider a change to the wording

### 10. Any other business

10.1 MV gave an update on the IET consultation which had run between January and 3 April 2019 and had received over 600 responses which were being analysed. The Chair thanked the members who had attended consultation events and stakeholder meetings.

10.2 There being no further public business, the meeting closed at 15:30.

Date of the next meeting: Thursday 16 May 2019

## Council actions log

Meeting date	Ref.	Action	Owner	Due	Status	Comments/update
7 February 2019	100.2	Further update on engagement with the public on the publication of inspection reports to be provided before publication begins	MV/RO	June 19	Open	This will be covered in the June communications and engagement update
April 2019	113.6	Develop clear policy around differential fees, with timelines	DR	June 19 for update	Open	Work has begun and an update will be provided

## **Meeting paper**

Council on Thursday, 16 May 2019

**Public business** 

## **Council Workshop Summary**

### **Purpose**

To provide an outline note of the discussions at the Council workshop on 11 April 2019.

### **Recommendations**

The Council is asked to note the discussions from the workshop.

### 1. Introduction

- 1.1. The Council holds a workshop session alongside its regular Council meetings each month (there are no meetings in January and August). The workshops give Council members the opportunity to:
  - interact with and gain insights from staff responsible for delivering regulatory functions and projects;
  - receive information on projects during the development stages;
  - provide guidance on the direction of travel for work streams via feedback from group work or plenary discussion; and
  - receive training and other updates.
- 1.2. Following each workshop there is a summary of the discussions that took place, presented at the subsequent meeting. This makes the development process of our work streams more visible to the GPhC's stakeholders. Some confidential items may not be reported on in full.
- 1.3. In the workshop sessions the Council does not make decisions. The sessions are informal discussions to aid the development of the Council's views.

### 2. Summary of the April workshop

### Ireland – regulatory issues and opportunities

2.1 Mark Voce (Director of Education and Standards) and Damian Day (Head of Education) presented a session covering the regulatory position, the implications of Brexit and the possibility of moving to a four-country registration assessment.

- 2.2 In summary, the GPhC regulated pharmacy professionals and pharmacies in Great Britain (England, Scotland and Wales) while the Pharmaceutical Society of Northern Ireland (PSNI) had the same responsibilities in Northern Ireland and the Pharmaceutical Society of Ireland (PSI) in the Republic of Ireland. There were reciprocal registration provisions in Great Britain and Northern Ireland, a memorandum of understanding to secure consistent standards of professional practice and the GPhC accredited pharmacy degrees awarded in NI. However, there was still separate registration assessments and the GPhC and PSNI had begun to explore the possibility of moving to a four-country assessment.
- 2.3 Moving to a UK-wide assessment wold fully harmonise the initial education and training requirements for pharmacists in the UK. If agreed, the first common cohort would sit the assessment in June 2021.
- 2.4 The Common Travel Area (CTA) ensured freedom to work and move between the UK and the Republic of Ireland and pharmacy was covered by the Mutual Recognition of Professional Qualifications directive. The UK and Irish governments were committed to maintaining CTA rights and privileges post-Brexit.
- 2.5 The GPhC continued to liaise with various bodies on the implications of Brexit, including contributing to discussions on Serious Shortage Protocols.

### New member introductions

2.6 The new members of Council – Neil Buckley, Penny Hopkins, Ann Jacklin, Rima Makarem and Aamer Safdar – each introduced themselves and gave a brief description of their backgrounds.

### Equality, diversity and inclusion – plenary session

2.12 Francesca Okosi and Vanda Thomas led a session which followed on from the March workshop, asking Council members to suggest priorities for the Council's future work on equality, diversity and inclusion.

### **Board effectiveness**

2.17 George Mystowski of Rialto gave an update on the work he had been carrying out with the Council on board effectiveness and the possible next steps for that work.

## **Recommendations**

3.1 Council is asked to note the discussions from the workshop

Janet Collins, Governance Manager General Pharmaceutical Council

janet.collins@pharmacyregulation.org Tel 020 3713 8139

## **Meeting paper**

Council on Thursday 16 May 2019

**Public business** 

## **Policy and procedure review**

### **Purpose**

To seek Council's approval for the policies and procedures within its remit which have been recently reviewed.

### Recommendations

The Council is asked to approve:

- i. the Standing Orders of the General Pharmaceutical Council;
- ii. the Standing Orders of the non-statutory committees of the General Pharmaceutical Council;
- iii. the Reappointment of Council members and Chair of Councilprocedure;
- iv. the Appointment of deputy Chair of Councilprocedure;
- v. the Standard of attendance at meetings for Council members and GPhC associates policy;
- vi. the Standards of education and learning for Council members and GPhC associates policy; and
- vii. the Council member and Council Chair appraisal process.

### 1. Introduction

- 1.1. Authority in a number of policy areas is reserved to the Council within the Scheme of Delegation. This paper presents a review of a number of those policies and documents and asks the Council to approve minor updates and amendments.
- 1.2. Our policies and procedures are reviewed on a regular basis to ensure that they remain fit for purpose and in line with relevant legislation and other good practice guidance. The policies updated in this round have been put into the current template and are set out

below alongside a brief summary of the proposed amendments. These amendments are recommended to the Council for approval.

### 1.3. The updated policies and procedures are attached at **Appendices 1 – 7**.

### 2. Summary of updates

(a) Standing Orders of the General Pharmaceutical Council

### See Appendix 1

2.1. There are no significant changes to the Standing Orders. A minor change is suggested in paragraph 12.2, which currently reads:

"If a quorum is not present within 15 minutes of the time appointed for a meeting to commence, the meeting shall be dissolved and all business which should have been transacted at that meeting shall be held over until the next scheduled meeting, unless an additional meeting is called in the meantime for the transaction of that business".

2.2. Although Council business is not normally adversely affected by such matters, given the potential for travel and other delays in exceptional circumstances, this seems overly prescriptive. We therefore recommend replacing this with:

"If a quorum is not present within *a reasonable time* after the time appointed for a meeting to commence, the meeting *may* be dissolved and all business which should have been transacted at that meeting shall be held over until the next scheduled meeting, unless an additional meeting is called in the meantime for the transaction of that business".

### (b) Standing Orders of non-statutory committees of the General Pharmaceutical Council

### See Appendix 2

- 2.3. There are no significant changes to the Standing Orders of non-statutory committees. The same minor change is suggested as for the Standing Orders of the Council, above (see paragraph 8.2 of Appendix 2).
- 2.4. Paragraph 9.2 has been re-worded slightly to make clear that the requirement for a register of interests, gifts and hospitality refers to independent members as well as Council members.

### (c) Reappointment of Council members and Chair of Council

### See Appendix 3

2.5. There are no significant changes to the procedure for re-appointing Council members and the Chair. References to the 'Head of Governance' have been replaced with 'the Governance team' to reflect current working practices and a sentence has been added to clarify that the

timetable for making appointments or re-appointments must begin early enough to allow for open competition if needs be.

2.6. Paragraph 3.6 has been updated to reflect the PSA's 'Good practice in making council appointments', which states that when reappointments are being considered, "the regulator should not recommend some members for reappointment while others who are eligible for reappointment are required to go through an open competition. If an open competition is run, all those sitting members who desire (and are eligible for) a further term must go through the open competition."

### (d) Appointment of deputy Chair of Council

### See Appendix 4

2.7. No significant changes – minor updates to language only.

## (e) Standard of attendance at meetings for Council members and GPhC associates policy See Appendix 5

- 2.8 The standards of attendance at meetings have been amended. Members will still be required to attend 80% of Council meetings, workshops and committee meetings but will now be required to be present for the whole duration of a meeting or a workshop for their attendance to count.
- 2.9 This will apply to all meetings for which travel arrangements have not yet been made.
- 2.10 Where late arrival or non-attendance is due to circumstances beyond the member's control, this will be acknowledged and will not put the member at a disadvantage.
- 2.11 Public reporting of Council member attendance will continue but future reporting will also include acknowledgement of events which the member has attended outside the GPhC but in their capacity as a Council member.

## (f) the Standards of education and learning for Council members and GPhC associates policy

### See Appendix 6

2.12 No significant changes – minor updates to language only.

### (g) the Council member and Council Chair appraisal process

2.13 No significant changes – minor updates to language only.

### 3. Equality and diversity implications

3.1. Equality and diversity implications have been considered in the updating of individual policies and the changes recommended in this paper do not raise any specific equality or diversity issues.

### 4. Communications

4.1. Subject to approval by the Council, we will publish the updated policies on our intranet and raise awareness through a variety of mechanisms including the Capsule - our all staff e-newsletter. Where relevant, policies will also be published on our website. Policies affecting non-staff will also be shared through the relevant channels.

### 5. Resource implications

5.1. There are no specific resource considerations associated with the policy and procedure review.

### 6. Risk implications

6.1. It is essential that our range or policies and procedures are fit for purpose and reflect current legislation or other good practice guidance. It is also vital that policies are clear and published in an accessible format, so that people understand their responsibilities and what they can expect from the organisation.

### 7. Monitoring and review

7.1. Each policy has a review date at which point the effectiveness of the policy is reviewed as well as currency with relevant guidance and best practice. Policies are reviewed earlier if there are changes in legislation or other processes which need to be reflected.

### Recommendations

The Council is asked to approve:

- i. the Standing Orders of the General Pharmaceutical Council;
- ii. the Standing Orders of the non-statutory committees of the General Pharmaceutical Council;
- iii. the Reappointment of Council members and Chair of Council procedure;
- iv. the Appointment of deputy Chair of Council procedure;

- v. the Standard of attendance at meetings for Council members and GPhC associates policy;
- vi. the Standards of education and learning for Council members and GPhC associates policy; and
- vii. the Council member and Council Chair appraisal process.

### Janet Collins, Governance Manager janet.collins@pharmacyregulation.org

Tel 020 3713 8139

### Laura McClintock, Chief of Staff

laura.mcclintock@pharmacyregulation.org

Tel 020 3713 8079



Appendix 1

# Standing Orders of the General Pharmaceutical Council

**GPHC0025 Version 2** 

These Standing Orders, together with the provisions of the Pharmacy Order 2010 and the General Pharmaceutical Council (Constitution) Order 2010 (together, 'the Orders'), establish the basic rules about how the Council conducts its proceedings.



## Contents

1.	Application and Interpretation	5
2.	Statutory Framework	5
3.	Composition of the Council, tenure and role of members	6
4.	Frequency of meetings	6
5.	Notice of meetings	7
6.	Adjournment of meeting	7
7.	Agenda	7
8.	Public access to meetings	8
9.	Observers	8
10.	Meetings using remote conference facilities	8
11.	Chair	8
12.	Quorum	9
13.	Interests of Members	9
14.	Minutes of Council Meetings	10
15.	The Secretary	10
16.	Conduct of Council Members	10
17.	Members education, training and performance	11
18.	Voting and recording of votes	11
19.	Suspension of a Standing Order	11
20.	Provisional Suspension of Members	12
21.	The Chief Executive & Registrar, Secretary and advisers	12
22.	Committees and working groups	12
23.	Custody and Affixing of Corporate Seal	12

# **Standing Orders of the General Pharmaceutical Council**

## 1. Application and Interpretation

- 1.1 These Standing Orders, together with the provisions of the Pharmacy Order 2010 and the General Pharmaceutical Council (Constitution) Order 2010 (together, 'the Orders'), establish the basic rules about how the Council conducts its proceedings.
- 1.2 Unless the context otherwise requires, terms used in the Standing Orders shall have the same meaning as in the Orders and in addition:
  - 1.2.1 'General Pharmaceutical Council' or 'GPhC' means the General Pharmaceutical Council as a body corporate;
  - 1.2.2 'Council' means the members of the General Pharmaceutical Council acting collectively as a body;
  - 1.2.3 'Chair' means the person appointed by the Privy Council to lead the Council in successfully discharging its overall accountability for the GPhC as a whole;
  - 1.2.4 'Member' means a member of the Council.
- 1.3 If a procedural point arises during a meeting of the Council which is not covered by these Standing Orders or the Orders, the common law rules concerning the conduct of meetings will apply.
- 1.4 Save as otherwise permitted by law, at any meeting of the Council, the Chair shall be the final authority on the interpretation of these Standing Orders.

## 2. Statutory Framework

- 2.1. The General Pharmaceutical Council is a statutory body corporate established under the Orders.
- 2.2. The GPhC will also be bound by such other statutes and legal provisions as govern the conduct of its affairs.

## 3. Composition of the Council, tenure and role of members

- 3.1. In accordance with the Orders the composition of the Council shall be seven lay members and seven registrant members.
- 3.2. Parts 2 and 3 of the General Pharmaceutical Council (Constitution Order) 2010 determine that the Chair and members are appointed by the Privy Council
- 3.3. The terms of office of the Chair and members and arrangements for the termination or suspension of office of the Chair and members are governed by Parts 2 and 3 of the General Pharmaceutical Council (Constitution Order) 2010.
- 3.4. The Council will function as a corporate decision-making body. Lay and registrant members will be full and equal members. Their role as members will be to consider the key strategic and policy issues facing the GPhC in carrying out its functions
- 3.5. All business shall be conducted in the name of the GPhC.
- 3.6. The members shall not be granted nor shall they seek to exercise any individual executive powers on behalf of the GPhC unless specifically authorised to do so by the Council. They may however, exercise collective authority when acting as members of any committee of the GPhC to which the Council has delegated powers.
- 3.7. The Chair shall be responsible for the operation of the Council. The Chair must comply with the terms of appointment and with these Standing Orders.
- 3.8. The Chair shall work in close harmony with the Chief Executive & Registrar and shall ensure that appropriate issues are discussed by the Council in a timely manner with the necessary information and advice being made available to the Council to inform the debate and decisions.

## 4. Frequency of meetings

- 4.1. The Council shall meet as necessary for the transaction of its business, normally according to a schedule agreed by the Council, provided that the Council shall meet at least four times a year.
- 4.2. Additional Council meetings, outside the agreed schedule, may be convened by the Secretary upon the written request of the Chair or any six members of the Council.
- 4.3. A written request for an additional Council meeting shall include details of the business to be transacted at that meeting.
- 4.4. An additional Council meeting shall be held within such reasonable time of the Secretary receiving the request for the meeting as the Chair shall see fit.

## 5. Notice of meetings

- 5.1. Before each meeting of the Council, a written notice specifying the business proposed to be transacted shall be delivered to every member, or sent by post or electronic transmission to each member.
- 5.2. The Secretary shall normally give members not less than seven clear days' notice of the time and place of a meeting.
- 5.3. If for any reason a meeting is convened at shorter notice, the Secretary shall give members notice of the time and place of the meeting at the time that the meeting is convened.
- 5.4. Failure to provide notice of a meeting to a member shall not invalidate the proceedings of that meeting.

## 6. Adjournment of meeting

- 6.1. The Chair may, with the consent of the Council, adjourn a meeting, but no business shall be transacted at an adjourned meeting other than the business which had not been disposed of when the adjournment took place.
- 6.2. If a meeting is adjourned for more than seven days (but not otherwise), notice of the meeting shall be given as if it was an additional meeting.

## 7. Agenda

- 7.1. The Secretary shall issue an agenda for each meeting. The Chair shall determine the content of the agenda, having consulted with the Chief Executive & Registrar.
- 7.2. Except in cases of urgency or where circumstances make it impracticable to do so, the agenda for a meeting and any accompanying papers shall be sent to members not less than seven days before the meeting.
- 7.3. Any member wishing to raise any matter at a Council meeting shall notify the Chair and Secretary not less than 14 days before the meeting.
- 7.4. No business other than that which has been included on the agenda, or of which notice has been given under paragraph 7.3 above, shall be discussed at any Council meeting, with the exception of urgent business which may be discussed with the consent of the Chair.

## 8. Public access to meetings

- 8.1. Members of the public may attend meetings of the Council. The public shall be excluded from any part of the meeting dealing with confidential business.
- 8.2. Before excluding the public from any part of a meeting under paragraph 8.1 above, the Chair shall announce the reasons why the Council is to hold a confidential session.
- 8.3. Matters to be dealt with in confidential business shall be confidential to the members of the Council. Members shall not reveal or disclose outside the GPhC the contents of papers or minutes marked as confidential without the express permission of the Council. This prohibition shall apply equally to the content of any discussion during a Council meeting which may take place on such papers or minutes.
- 8.4. Electronic recording, transmission or photography of Council meetings without prior permission from the Chair is prohibited.
- 8.5. If a member of the public interrupts the proceedings at any meeting, the Chair may order that person to be removed from the meeting or may order that part of the room which is open to the public to be cleared.

### 9. Observers

9.1. The Council may decide what arrangements and terms and conditions it considers are appropriate to any observers invited to attend or address any of the Council's meetings and may change or vary these arrangements, terms and conditions as it sees fit.

## 10. Meetings using remote conference facilities

10.1. At the discretion of the Chair, meetings of the Council may be held in the form of a teleconference or using other remote conference facilities which allow all Council members participating to hear and address one another. Such meetings will be deemed to take place at the location of the Chair.

## 11. Chair

- 11.1. The Chair shall preside at any meeting of the Council.
- 11.2. If the Chair is absent from, or otherwise unable to preside at, a meeting, the members present shall nominate one of their number to serve as chair at that meeting.
- 11.3. In these Standing Orders, references to the 'Chair' include a member presiding at a meeting of the Council in place of the Chair.

### 11.4. In the event that:

- (a) the Chair is likely to be absent for more than one meeting of the Council or to be unavailable to perform the duties of the Chair for more than one month; or
- (b) the office of Chair is vacant,

the Secretary shall notify the Council accordingly and the Council shall proceed to nominate one of its members ('deputy chair') to serve as Chair during the absence or unavailability of the Chair or the vacancy. The Council may identify the deputy chair who would serve in advance of such circumstances arising.

## 12. Quorum

- 12.1 The quorum at any meeting of the Council shall be eight members. No business shall be transacted at a meeting unless at least eight members are present.
- 12.2 If a quorum is not present within a reasonable time after the time appointed for a meeting to commence, the meeting may be dissolved and all business which should have been transacted at that meeting shall be held over until the next scheduled meeting, unless an additional meeting is called in the meantime for the transaction of that business.
- 12.3 If, during a meeting, it appears to the Chair that a quorum has ceased to exist, business will be suspended and the number of members present counted and, if;
  - (a) a quorum exists, the business will proceed;
  - (b) a quorum does not exist, the meeting will be dissolved and all remaining business will be adjourned to the next scheduled meeting, unless an additional meeting is called in the meantime for the transaction of that business.
- 12.4 If a member has been disqualified from participating in discussion of and/or voting on any matter by reason of a conflict of interest, that member shall not count towards the quorum. If a quorum is not available for the discussion of and/or voting on any matter, that matter may not be discussed further or voted upon at that meeting. Such a position shall be recorded in the minutes of the meeting. The meeting shall then proceed to the next item of business.

### **13. Interests of Members**

- 13.1. Members must ensure that no conflict arises, or could reasonably be perceived to arise, between their position as a Council member and their personal interests, financial or otherwise.
- 13.2. A member who has a personal interest in any matter under consideration at a meeting, whether or not declared in the Register of Members' Interests, shall promptly declare that interest and,

unless the Chair determines otherwise, the member shall withdraw from the meeting until the Council has concluded its consideration of the matter.

- 13.3. In any case of doubt the member should openly declare the possibility of interest.
- 13.4. All declarations of interest shall be recorded in the minutes.

## 14. Minutes of Council Meetings

- 14.1. The Secretary shall produce minutes of each meeting which shall include a record of the members in attendance at that meeting.
- 14.2. At each meeting, the minutes of the previous meeting shall be confirmed, or confirmed as amended, by the Council.
- 14.3. No discussion shall take place upon the minutes except upon their accuracy or where the Chair considers discussion appropriate.
- 14.4. The confirmed minutes of a meeting shall, unless the contrary is proved, be a correct and authoritative record of the meeting.
- 14.5. Where they provide a record of a public meeting, the minutes shall be made available to the public

## **15. The Secretary**

- 15.1. The Chief Executive & Registrar shall be the Secretary to the Council.
- 15.2. The Chief Executive & Registrar may authorise any employee of the Council to act for him or her as Secretary to the Council and where the Chief Executive & Registrar does so, a reference in these Standing Orders to the Secretary shall include reference to the person so authorised.

## **16. Conduct of Council Members**

- 16.1. Members shall comply with the Code of Conduct adopted by the Council and with the seven principles of public life established by the Committee on Standards in Public Life (the 'Nolan Principles').
- 16.2. The Chair may order a member to withdraw from a meeting if, in the opinion of the Chair, that member has persistently disregarded the ruling of the Chair or is behaving improperly, offensively or in a manner which is obstructing the business of the meeting.
- 16.3. In the event of a general disturbance which, in the opinion of the Chair, prevents the orderly conduct of business, the Chair may adjourn the meeting for such a period as the Chair considers appropriate.

## 17. Members education, training and performance

- 17.1. Members shall comply with the Code of Conduct adopted by the Council and with the seven principles of public life established by the Committee on Standards in Public Life (the 'Nolan Principles').
- 17.2. The Council shall establish standards of attendance and performance for members, including a system of annual performance appraisal.
- 17.3. Members shall comply with the standards established by the Council under Standing Orders 17.1 and 17.2 and shall not, without reasonable cause, fail to undertake satisfactorily the education and training requirements or to participate in appraisal processes for members

## 18. Voting and recording of votes

- 18.1. Decisions shall be taken by vote in the following circumstances:
  - (a) When the Chair determines that no clear consensus has emerged;
  - (b) When a member requests a vote be taken and this is supported by at least one other member; or
  - (c) When the Chair concludes that a vote should be taken.
- 18.2. Voting shall be by a simple majority of those members present and voting, unless specified otherwise in these Standing Orders or in the Orders.
- 18.3. Voting shall be by a show of hands or by any technological equipment provided
- 18.4. The Chair shall have a substantive vote and, in any case of an equality of votes, a second or casting vote
- 18.5. The minutes shall record the numbers voting for and against the proposal and the number of abstentions, if any.
- 18.6. If a majority of the members present so request, the voting on any question may be recorded to show how each member present voted or did not vote.
- 18.7. In no circumstance may an absent member vote by proxy. Absence is defined as being absent at the time of the vote.

## 19. Suspension of a Standing Order

19.1. Except where this would contravene any statutory provision, the Council may suspend any one or more of the Standing Orders at any meeting, by resolution of the Council carried by not less

than two-thirds of the members present and voting. The reason for the suspension shall be recorded in the minutes.

- 19.2. In proposing the suspension of one or more of the Standing Orders, the member making the proposal must state the number(s) of the Standing Order(s).
- 19.3. If such a proposal is agreed the suspension shall be for the duration of the item under discussion.

## 20. Provisional Suspension of Members

- 20.1. If circumstances arise which may result in a member being suspended or removed from office by the Privy Council under the Orders, the Council may resolve that the member shall be provisionally suspended from office until such a time as the Privy Council has reached a decision on whether to suspend or remove the member.
- 20.2. A member who is provisionally suspended shall not be entitled to participate in meetings of the council or to exercise any other functions of a member.

## 21. The Chief Executive & Registrar, Secretary and advisers

- 21.1. The Chief Executive & Registrar and the Secretary shall be entitled to attend and address meetings of the Council
- 21.2. Any other person advising on the business before a meeting of the Council, including advising the Chair on matters relating to governance, may attend and, with the consent of the Chair, address the meeting.

## 22. Committees and working groups

22.1. The Council may from time to time establish or dissolve committees or other informal groups, composed of its own members or other persons, for such purposes as may be expedient. Nothing in this paragraph applies to any committee established by or under legislation.

## 23. Custody and Affixing of Corporate Seal

- 23.1. The Corporate Seal of the Council shall be kept by the Chief Executive & Registrar or another employee designated by the Chief Executive & Registrar, in a secure place
- 23.2. The Corporate Seal shall only be affixed to a document with the consent of the Council and shall be attested by the signature of:

Standing Orders of the General Pharmaceutical Council GPHC0025 V2

- (a) The Chair or a member of the Council authorised by the Chair for that purpose; and
- (b) The Chief Executive & Registrar or an employee authorised by the Chief Executive & Registrar for that purpose.
- 23.3. The Chief Executive & Registrar or an employee designated by the Chief Executive & Registrar shall keep a record of the affixing of the Corporate Seal.

## **Procedure details**

Procedure reference	GPHC0025				
Version	2				
Procedure author	Matthew Hayday				
Approved for issue by	Council – 12/06/14				
Effective from	27 June 2014	Next review date	April 2022		

## Version control tracker

Version	Approved date	Description of change	Amendments by
1	27/06/14		Matthew Hayday, Head of Governance
2		Updated procedure into new template style, changed reference from GG/2014/05 to GPHC0025. Minor updates	Janet Collins, Governance Manager



General Pharmaceutical Council 25 Canada Square, London E14 5LQ www.pharmacyregulation.org



**Appendix 2** 

# Standing Orders of Non-Statutory Committees of the General Pharmaceutical Council

## GPHC0026 V2

These Standing Orders, together with the provisions of the Pharmacy Order 2010 and the General Pharmaceutical Council (Constitution) Order 2010 (together, 'the Orders'), establish the basic rules about how the committees conducts their proceedings.

## Contents

1.	Application and Interpretation	3
2.	Frequency of Meetings	3
3.	Notice of Meetings	3
4.	Agenda	4
5.	Meetings using remote conference facilities	4
6.	Chair	4
7.	Length of service on a committee	5
8.	Quorum	5
9.	Interests of members	5
10.	Minutes of committee meetings	6
11.	Secretary	6
12.	Powers and accountability	6
13.	Conduct of committee members	6
14.	Members' education, training and performance	7
15.	Voting and recording of votes	7
16.	Suspension of a Standing Order	7
17.	The Chief Executive & Registrar, Secretary and advisers	8
18.	Dealing with Confidential Matters	8

# Standing Orders of Non-Statutory Committees of the General Pharmaceutical Council

## 1. Application and Interpretation

- 1.1. Meetings of any non-statutory committees of the General Pharmaceutical Council are regulated in accordance with these Standing Orders which the Council shall agree from time to time. Amendments to these Standing Orders may be made only by the Council.
- 1.2. These Standing Orders, together with the provisions of the Pharmacy Order 2010 and the General Pharmaceutical Council (Constitution) Order 2010 (together, 'the Orders'), establish the basic rules about how the committee conducts its proceedings.
- 1.3. Unless the context otherwise requires, terms used in the Standing Orders have the same meaning as in the Orders.
- 1.4. If a procedural point arises during a meeting of the committee which is not covered by these Standing Orders or the Orders, the common law rules concerning the conduct of meetings will apply.
- 1.5. The Chair of the committee is the final authority as to the interpretation of these Standing Orders.

## 2. Frequency of Meetings

2.1. The committee shall meet as necessary for the transaction of its business, normally between two and four times a year.

## 3. Notice of Meetings

- 3.1. The Secretary shall normally give members not less than seven clear days' notice of the time and place of a meeting.
- 3.2. If for any reason a meeting is convened at shorter notice, then the Secretary shall give members notice of the time and place of the meeting at the time that the meeting is convened.
- 3.3. Failure to provide notice of a meeting to a member shall not invalidate the proceedings of that meeting.

## 4. Agenda

- 4.1. The Secretary shall issue an agenda for each meeting. The Chair shall determine the content of the agenda, having consulted with the Secretary.
- 4.2. Except in cases of urgency or where circumstances make it impracticable to do so, the agenda for a meeting and any accompanying papers shall be sent to members not less than seven days before the meeting.
- 4.3. Any member wishing to raise any matter at a committee meeting shall notify the Chair and Secretary not less than 14 days before the meeting.
- 4.4. No business other than that which has been included on the agenda, or of which notice has been given under para 4.3 above, shall be discussed at any committee meeting, with the exception of urgent business which may be discussed with the consent of the Chair.

## 5. Meetings using remote conference facilities

5.1. At the discretion of the Chair, meetings of the committee may be held in the form of a teleconference or using other remote conference facilities which allow all members participating to hear and address one another. Such meetings will be deemed to take place at the location of the Chair.

## 6. Chair

- 6.1. The Chair of the committee shall be appointed by the Council or by a person, group, body or committee to whom the Council delegates this function.
- 6.2. The Chair shall preside at any meeting of the committee.
- 6.3. If the Chair is absent from, or otherwise unable to preside at, a meeting, the members present shall nominate one of their number to serve as chair at that meeting.
- 6.4. In these Standing Orders, references to the 'Chair' include a member presiding at a meeting of the committee in place of the Chair.
- 6.5. In the event that the Chair is likely to be absent for more than one meeting of the committee or to be unavailable to perform the duties of the Chair for more than one month, the Secretary shall notify the committee accordingly and the committee shall proceed to nominate one of its members ('deputy chair') to serve as committee during the absence or unavailability of the Chair.

## 7. Length of service on a committee

- 7.1. No member of the Committee may hold office as a member of the Committee for more than an aggregate of eight years during any period of 20 years. As with the Council there is no maximum number of terms that a member may serve; however, a member shall not be appointed to a committee for a term that exceeds their term as a Council member.
- 7.2. Other provisions regarding the composition of committees are set out in the terms of reference of each committee.

## 8. Quorum

- 8.1. The quorum at any meeting of the committee shall be as determined by the Council. No business shall be transacted at a meeting unless at least a quorum of members is present.
- 8.2. If a quorum is not present within *a reasonable time* after the time appointed for a meeting to commence, the meeting *may* be dissolved and all business which should have been transacted at that meeting shall be held over until the next scheduled meeting, unless an additional meeting is called in the meantime for the transaction of that business.
- 8.3. If, during a meeting, it appears to the Chair that a quorum has ceased to exist, business will be suspended and the number of members present counted and, if;
  - (a) A quorum exists, the business will proceed
  - (b) A quorum does not exist, the meeting will be dissolved and all remaining business will be adjourned to the next scheduled meeting, unless an additional meeting is called in the meantime for the transaction of that business.
- 8.4. If a member has been disqualified from participating in a discussion of and/or voting on any matter by reason of a conflict of interest, that member shall not count towards the quorum. If a quorum is not available for the discussion of and/or voting on any matter, that matter may not be discussed further or voted upon at that meeting. Such a position shall be recorded in the minutes of the meeting. The meeting shall then proceed to the next item of business.

### 9. Interests of members

- 9.1. Members must ensure that no conflict arises, or could reasonably be perceived to arise, between their position as a committee member and their personal interests, financial or otherwise.
- 9.2. All members of the committee shall complete, and keep up to date, a register of interests, gifts and hospitality. (A register of Council members' interests, gifts and hospitality is maintained separately and Council members on committees will not be asked to supply a duplicate register

entry.) The Secretary of the committee shall keep the register of committee members' interests, which shall be available for Council and committee members to see on request.

- 9.3. A member who has a personal interest in any matter under consideration at a meeting, whether or not declared in the register of members' Interests, shall promptly declare that interest and, unless the Chair determines otherwise, the member shall withdraw from the meeting until the committee has concluded its consideration of the matter.
- 9.4. In case of any doubt the member should openly declare the possibility of an interest.
- 9.5. All declarations of interest shall be recorded in the minutes.

### 10. Minutes of committee meetings

- 10.1. The Secretary shall produce minutes of each meeting which shall include a record of the members in attendance at that meeting.
- 10.2. At each meeting, the minutes of the previous meeting shall be confirmed, or confirmed as amended, by the committee.
- 10.3. The confirmed minutes of a meeting shall, unless the contrary is proved, be a correct and authoritative record of the meeting.

### **11. Secretary**

11.1. The committee Secretary shall be appointed by the Chief Executive & Registrar.

### 12. Powers and accountability

- 12.1. The committee is accountable to the Council.
- 12.2. Subject to any statutory restrictions, the committee shall have such terms of reference and powers and shall be subject to such conditions as determined by the Council.
- 12.3. No committee may establish a sub-committee unless expressly authorised by the Council.

### 13. Conduct of committee members

- 13.1. Members shall comply with the seven principles of public life established by the Committee on Standards in Public Life (the 'Nolan Principles').
- 13.2. The Chair may order a member to withdraw from a meeting if, in the opinion of the Chair, that member has persistently disregarded the ruling of the Chair or is behaving improperly, offensively or in a manner which is obstructing the business of the meeting.

Standing Orders of Non-Statutory Committees of The General Pharmaceutical Council GPHC0026

13.3. In the event of a general disturbance which, in the opinion of the Chair, prevents the orderly conduct of business, the Chair may adjourn the meeting for such a period as the Chair considers appropriate.

## 14. Members' education, training and performance

14.1. Members shall not, without reasonable cause, fail to undertake satisfactorily any education or training provided for members or to participate in any appraisal processes for members.

## **15. Voting and recording of votes**

- 15.1. Decisions shall be taken by vote in the following circumstances:
  - a) When the Chair determines that no clear consensus has emerged;
  - b) When a member requests a vote be taken and this is supported by at least one other member; or
  - c) When the Chair concludes that a vote should be taken.
- 15.2. Voting shall be by a simple majority of those members present and voting, unless specified otherwise in these Standing Orders or in the Orders.
- 15.3. Voting shall be by a show of hands or by any technological equipment provided.
- 15.4. The Chair shall have a substantive vote and, in any case of an equality of votes, a second or casting vote.
- 15.5. The minutes shall record the numbers voting for and against the proposal and the number of abstentions, if any.
- 15.6. If a majority of the members present so request, the voting on any question may be recorded to show how each member present voted or did not vote.
- 15.7. In no circumstances may an absent member vote by proxy. Absence is defined as being absent at the time of the vote.

## 16. Suspension of a Standing Order

- 16.1. Except where this would contravene any statutory provision, the committee may suspend any one or more of the Standing Orders at any meeting, by resolution of the committee carried by not less than two-thirds of the members present and voting. The reason for the suspension shall be recorded in the minutes.
- 16.2. In proposing the suspension of one or more of the Standing Orders, the member making the proposal must state the number(s) of the Standing Order(s).

Standing Orders of Non-Statutory Committees of The General Pharmaceutical Council GPHC0026

16.3. If such a proposal is agreed the suspension shall be for the duration of the item under discussion.

#### **17.** The Chief Executive & Registrar, Secretary and advisers

- 17.1. The Chief Executive & Registrar and the Secretary shall be entitled to attend and address meetings of the committee.
- 17.2. Any other person advising on the business before a meeting of the committee, including advising the Chair on matters relating to governance, may attend and, with the consent of the Chair, address the meeting.

#### **18. Dealing with Confidential Matters**

- 18.1. Meetings of the committee are not open to the public.
- 18.2. The proceedings of the committee are confidential to the members of the committee, the Council and staff, and any observers present at the invitation of the committee.
- 18.3. When discussing items relating to identifiable individuals or commercial items in confidence, the Audit, Remuneration and Appointments Committees will do so in confidential session, without observers present. The confidential agenda and minutes will not be circulated other than to members of the relevant committee.

### **Procedure details**

Procedure reference	GPHC0026		
Version	2		
Procedure author	Alison Readman, Interim Head of Governance		
Approved for issue by	Council, 11/04/13		
Effective from	11 April 2013	Next review date	April 2022

### Version control tracker

Version	Approved date	Description of change	Amendments by
1	11 April 2013	Creation	Alison Readman, Interim Head of Governance
2	April 2019	Updated to new template, changed reference from GG/2013/44 to GPHC0026, minor updates to text	Janet Collins, Governance Manager



General Pharmaceutical Council 25 Canada Square, London E14 5LQ www.pharmacyregulation.org



# Appendix 3 Reappointment of Council Members and Chair of Council

**GPHC0030 Version 2** 

This procedure sets the process of reappointment of Council Members and the Chair of the Council in the event they are eligible and considered for reappointment.



### Contents

5.	Measurement and evaluation	.Error! Bookmark not defined.
4.	Application of policy	7
3.	Policy Statement	
2.	Purpose of policy	
1.	Introduction	

# Reappointment of Council Members and Chair of Council

### **1. Introduction**

1.1 The following procedure is to be used when Council members or the Chair of Council are to be considered for potential reappointment.

### 2. Purpose of procedure

2.1. This procedure is intended to ensure that a consistent approach is taken when the potential reappointment of Council members or the Chair of Council is being considered. Any reappointment would be made by the Privy Council, once the process followed had been approved by the Professional Standards Authority.

#### 3. Procedure statement

- 3.1. This process takes account of the guidance on Good practice in making council appointments, issued by the Professional Standards Authority (PSA). The process for Council reappointments must adhere to the four principles of a good appointments process set out by the PSA: merit, fairness; transparency and openness, and inspiring confidence in regulation.
- 3.2. The Governance team will advise the Chair of Council and the Chief Executive & Registrar of any Council members whose terms are coming to an end of the timetable required for making timely appointments or reappointments.
- 3.3. The Governance team will establish which of those members whose terms are ending would be eligible for reappointment under the legislation and which of the eligible members would wish to be considered for a further term.
- 3.4. The Council will be asked to confirm whether Council vacancies will be filled using a combination of open competition and a reappointments process<sup>1</sup>, by open competition only, or by reappointment only.
- 3.5. In deciding whether open competition, reappointment or a combination of these should be used in a particular recruitment round, the Council should:

<sup>&</sup>lt;sup>1</sup> The Council agreed in April 2014 that Council vacancies would generally be filled using a combination of open competition and a reappointments process

- Assess and consider the current and future needs of the Council for particular skills and expertise
- Consider the balance between continuity and refreshment of the Council's membership. The aim should be to produce a degree of change which minimises the risks of stagnation, on the one hand, and instability and delays, on the other
- Consider the diversity of backgrounds within the Council's membership
- Take account of any relevant external factors eg. anticipated changes to the constitution of the Council.
- 3.6. This process applies when the Council decides that some or all of the vacancies should be filled by reappointment. Where this is the case, all re-appointments must be made via recommendation or open competition there must not be a mixture of the two with some members recommended for re-appointment and others required to go through open competition. If an open competition is run, all sitting members who desire and are eligible for a second term must go through that process.
- 3.7. The governance team will confirm the planned timing of the reappointment recommendation/s with the Privy Council and the PSA. Reappointments should not be made more than six months before they are due, so as to ensure that evidence of the member's performance is current and relevant.
- 3.8. It should be made clear at appointment and again when terms are due to end that there is no automatic right to reappointment. Each case will considered on merit, bearing in mind the current and future needs of the Council.
- 3.9. Factors to be considered in relation to potential reappointment are:
  - Merit, as evidenced by the member's performance assessment throughout their time in office
  - The current and assessed future needs of the Council for particular skills and expertise
  - Any potential conflict of interest
  - The member's attendance record and ability to continue to commit the time required to the role
  - Anything in the member's professional or personal background which could cause embarrassment to the GPhC or the Privy Council
  - Continuing to satisfy the eligibility criteria set out in the GPhC Constitution Order<sup>2</sup> eg. Relating to bankruptcy or criminal convictions

<sup>&</sup>lt;sup>2</sup> The General Pharmaceutical Council (Constitution) Order 2010 (S.I. 2010/300)

- The requirement that a member may not hold office for more than an aggregate of eight years within any twenty year period
- The requirement to have at least one Council member living or working in each of England, Scotland and Wales.
- 3.10. A member wishing to seek a further term will be asked to provide a brief statement of their case for reappointment, including confirmation that they continue to meet the eligibility criteria and would be able to commit the time required to the role. The member will also be asked to state whether there is anything in their professional or personal background which could cause embarrassment to the GPhC or the Privy Council.
- 3.11. The governance team will collate the following information relating to the member concerned for consideration by the Chair of Council, with the member's statement:
  - Records of appraisals since the member's last appointment
  - Attendance records at meetings of the Council and, where relevant, committees and working groups
  - The member's current statement of declared interests
  - The total period for which the member will have held office when the current term ends
  - The results of due diligence checks
  - Confirmation that relevant legislative provisions will be satisfied if the member is reappointed, including eligibility criteria, provisions relating to members from Scotland and Wales, and provisions relating to lay and registrant membership.
- 3.12. The Chair of Council will decide whether to recommend a member for reappointment and, if so, the recommended term of the reappointment. In doing so, the Chair should assess whether the member seeking reappointment continues to meet the Council's requirements and is likely to continue to do so during a further term, bearing in mind the current context of the Council's work and any anticipated changes.
- 3.13. In determining the term of office to be recommended, factors to be considered include:
  - The perceived likelihood of change in the Council's need for particular skills and expertise during the term being contemplated
  - The balance between continuity and change within the Council's membership
  - The wishes of the member concerned

- The desirability of holding recruitment &/or reappointment processes no more often than every two years<sup>3</sup>.
- 3.14. The Chair will provide the Notice of Reappointment Recommendation to the PSA with the following information (with the name of the member redacted):
  - Statement of case for reappointment from the Council member concerned
  - Recommendation from the Chair, including discussion of whether the competencies required of Council members have changed since the member was first appointed and, if so, how the member has demonstrated that they meet the revised competencies
  - Summary of the member's most recent appraisal, including the outcome of the appraisal and any areas of concern
  - Up-to-date profile of other Council members
  - Recommendation for term of reappointment and explanation
  - Any other information relevant to the reappointment.
- 3.15. The governance team will notify the Privy Council office of the recommendation/s for reappointment
- 3.16. The process for reappointment of a Chair of Council will be the same as for a Council member except that:
  - The Chief Executive & Registrar will discuss with the Chair whether they intend to seek a further term
  - If so, the Council will assess the current and future needs of the regulator
  - The Council will also nominate two Council members (one lay, one registrant) to
    oversee the collation and assessment of evidence in the same way that the Chair of
    Council does for a member seeking reappointment, and to submit the
    recommendation of reappointment to the PSA. The Council should select members
    with appropriate skills and experience who are impartial and will be perceived to be
    so. These members would be expected to provide a written declaration that they do
    not intend to seek a further term of office. The appraisal reports for the Chair of
    Council will be based on a 360° appraisal process, including third party feedback.
  - The Chair will be asked to provide a broader statement in support of their potential reappointment, including their ideas and approach to a further term

<sup>&</sup>lt;sup>3</sup> The Council agreed in May 2012 that terms of office should be staggered to allow an appointments process to run every other year

- The Council will decide whether to recommend a Chair for reappointment and, if so, the recommended term of office
- In doing so, the Council will take account of the current and future needs of the regulator, as assessed. The Council should also reflect on other relevant information including: the GPhC's annual report, accounts and strategic plan; media and reports in the public domain, and proposed changes in the regulatory environment.

### 4. Application of procedure

4.1. This procedure applies to the Council and the governance team.

### **Policy details**

Policy reference	GPHC0030		
Version	1		
Policy author	Matthew Hayday		
Approved for issue by	Council – 13/11/14		
Effective from	14 November 2014	Next review date	April 2022

### Version control tracker

Version	Approved date	Description of change	Amendments by
1	13/11/14	Creation	Matthew Hayday, Head of Governance
2		Updated procedure into new template style, changed reference to GPHC0029. Minor updates. Requirement for all members eligible for re-appointment to be subject to the same process.	Janet Collins, Governance Manager

Reappointment of Council Members and Chair of Council GPHC0030 V2



General Pharmaceutical Council 25 Canada Square, London E14 5LQ www.pharmacyregulation.org



Appendix 4

# Appointment of Deputy Chair of the Council GPHC0031 Version 2

This procedure sets out the steps the Council Secretary should follow to organise the rota of deputy chairs.



# Appointment of Deputy Chair of the Council GPHC0031 V2

## Contents

1.	Introduction	3
2.	Purpose of procedure	3
3.	Procedure Statement	3
4.	Application of procedure	3

# Appointment of Deputy Chair of the Council

### 1. Introduction

1.1 At its meeting on 10<sup>th</sup> February 2010, the GPhC Council designate decided that a deputy chair would be appointed in advance to chair meetings of the Council should the need arise. The decision was ratified by the GPhC Council on 14<sup>th</sup> April 2010.

### 2. Purpose of procedure

2.1. This procedure sets out the steps the Council Secretary should follow to organise the rota of deputy chairs, in accordance with the Council's decision as set out above.

#### 3. Procedure Statement

- 3.1. When the last six-month period of the rota commences, the Council Secretary will invite Council members to signal their willingness to act as a rotating deputy chair to the Chair of Council.
- 3.2. When expressions of willingness have been received, the Chair will draw up a draft rota showing each candidate's name at random against a six month time slot. The Council Secretary will circulate the draft rota to the Council members concerned to check for any issues with the timing of the slots. The rota will then be circulated at the next Council meeting for noting.
- 3.3. If the Chair is unable to fulfil other functions apart from chairing Council meetings the GPhC Excecutive Office will make other arrangements.

### 4. Application of procedure

4.1. This procedure applies to the Council Secretary and the Chair of Council.

### **Procedure details**

Procedure reference	GPHC0031		
Version	1		
Policy author	Alison Readman, Council Secretary		
Approved for issue by	Council – 11/09/14		
Effective from	Next review date April 2022		

### Version control tracker

Version	Approved date	Description of change	Amendments by
1	27/06/14		Matthew Hayday, Head of Governance
2		Updated procedure into new template style, changed reference from GPr/2011/17 to GPHC0031. Language updated	Janet Collins, Governance Manager



General Pharmaceutical Council 25 Canada Square, London E14 5LQ www.pharmacyregulation.org



# Appendix 5 Standards of attendance at meetings for GPhC Council members and associates GPHC0028 Version 2

This policy sets out the scope of application and standards of attendance required of GPhC Council members and associates.



### Contents

1.	Introduction	3
2.	Scope of application of the standard	3
3.	Standard of attendance	3

# Standards of attendance at meetings for GPhC Council members and associates

### **1. Introduction**

1.1 Attendance at meetings is a fundamental requirement of good governance. Apart from the necessity for a quorum to be present before any business can be transacted by the Council or a committee, non-attendance can have repercussions relating to the breadth of input to decisions, members' awareness of current issues, and members' commitment to the successful fulfilment of the GPhC's purpose and functions.

### 2. Scope of application of the standard

- 2.1. As well as Council members, there are a number of non-employee groups who help the GPhC to fulfil its regulatory functions. We use the broad term 'associate' to describe these groups. Associates fill a variety of roles, providing a wide range of knowledge and skills to support the GPhC's work. These include: external members of non-statutory committees and working groups; statutory committee members, including fitness to practise panellists; visitors; CPD reviewers; assessors; evaluators & overseas panel members for registration applications; legal & clinical advisers, and medical assessors.
- 2.2. The standard of attendance at meetings applies to Council members and GPhC associates. If you are not sure whether this standard applies to you, please contact the governance team for information and advice.

### 3. Standard of attendance

- 3.1. Members or associates must be present for *the entire duration* of a meeting or workshop to be considered to have attended that meeting or workshop.
- 3.2. Members or associates should attend at least 80% of meetings of Council and of each committee or forum, including workshops, task and finish groups and other arrangements on behalf of the organisation, they are expected to attend in any one year. Further provisions on attendance which apply to members of statutory committees appear in the GPhC's Statutory Committees and their Advisers Rules 2010 (rule 10).

- 3.3. Members or associates must send their apologies to the team that supports them as soon as practicable if they are unable to attend a meeting.
- 3.4. Failure to attend the required number of meetings in any one year will be deemed a breach of the code of conduct. *However, absence or lateness cause by circumstances beyond the member's or associate's control will not disadvantage that person.* A breach of the code of conduct will be considered in line with the GPhC's governance framework and may be dealt with in accordance with the GPhC's ability to suspend or remove its members and associates.
- 3.5. Attendance records of Council members will be published annually. *These will also reflect any events attended by the members on behalf of the GPhC.*
- 3.6. Attendance records will form part of the appraisal of members and associates.

### **Procedure details**

Procedure reference	GPHC0028		
Version	1		
Procedure author	Matthew Hayday		
Approved for issue by	Council – 14/11/13		
Effective from	14 November 2016	Next review date	April 2022

### Version control tracker

Version	Approved date	Description of change	Amendments by
1	27/06/14	Creation	Matthew Hayday, Head of Governance
2		Requirements for attendance strengthened. Updated procedure into new template style, changed reference from GG/2014/51 to GPHC0028.	Janet Collins, Governance Manager



General Pharmaceutical Council 25 Canada Square, London E14 5LQ www.pharmacyregulation.org



Appendix 6

# Standards of Education and Learning for Council Members and GPhC Associates GPHC0027 Version 2

This policy sets out the standards of education and learning set by the Council for Council Members and GPhC Associates to meet its statutory obligations.



### Contents

1.	Introduction	. 3
2.	Scope of application of the standards	. 3
3.	Induction training	. 3
4.	Continuing development	. 4
5.	Review	. 4

# **Standards of Education and Learning for Council Members and GPhC Associates**

### 1. Introduction

- 1.1. The Council sets standards of education and learning for Council members and GPhC associates to meet its statutory obligations and also:
  - (a) to ensure that members and associates possess the skills and knowledge necessary to perform their functions effectively;
  - (b) to encourage members and associates to take responsibility for their learning and development needs; and
  - (c) to promote and establish a culture where ongoing education and learning is seen as an essential part of the success of the GPhC.

### 2. Scope of application of the standards

- 2.1. As well as Council Members, there are a number of non-employee groups who help the GPhC to fulfil its regulatory functions. We use the broad term 'associate' to describe these groups. Associates fill a variety of roles, providing a wide range of knowledge and skills to support the GPhC's work. These include: external members of non-statutory committees and working groups; statutory committee members, including fitness to practise panellists; visitors; CPD reviewers; assessors; evaluators and overseas panel members for registration applications; legal and clinical advisers, and medical assessors.
- 2.2. The standards of education and learning apply to Council members and GPhC associates. Further provisions on training which apply to members of statutory committees appear in the GPhC's Statutory Committees and their Advisers Rules 2010 (rule 10).

#### 3. Induction training

- 3.1. Members and associates must undertake induction training to ensure that they are aware of and understand:
  - (a) The purpose and accountability of the General Pharmaceutical Council
  - (b) Its functions and duties;
  - (c) Its stakeholders;

- (d) Members' or associates' role and functions;
- (e) Effective team working;
- (f) How the GPhC works;
- (g) The GPhC's equality, diversity and inclusion policy; and
- (h) The specific requirements and processes of any committees, panels or groups to which they are appointed.

#### 4. Continuing development

- 4.1. In addition to induction training upon joining the organisation, all members and associates are required to undergo continuing learning and development throughout the duration of their appointment.
- 4.2. Members and associates should ensure that they:
  - (a) identify any learning and development needs they may have;
  - (b) make suitable arrangements to undertake any learning and development required; and
  - (c) make the Executive of the GPhC aware of any learning and development they have undertaken which may be relevant to the performance of their role.

#### 5. Review

5.1. Members and associates' performance against these standards will be reviewed as part of their performance feedback and development review.

### Policy details

Policy reference	GPHC0027		
Version	2		
Policy author	Alison Readman, Head of Governance		
Approved for issue by	Council, 11 April 2013		
Effective from	11 April 2013	Next review date	April 2022

### Version control tracker

Version	Approved date	Description of change	Amendments by
1	11/04/13	Creation	Alison Readman
2		Updated to new template, changed reference from GG/2013/39 to GPHC0027, minor updates to language	Janet Collins



Appendix 7

# Council Member and Council Chair appraisal process GPHC0032 Version 2

This procedure sets out the process for the annual appraisal of Council Members and Chair of the Council.



# Council Member and Chair Appraisal Process GPHC0032 V2

### Contents

1.	Introduction	3
2.	Purpose of procedure	3
3.	Procedure Statement	3
4.	For Council members	3
5.	For the Chair	4

# **Council Member and Council Chair** appraisal process

### **1. Introduction**

1.1 This procedure sets out the process for annual appraisal of Council members and the Chair of the Council.

### 2. Purpose of procedure

2.1. This procedure is in place so that there is a clear process for the annual appraisal of Council members and the Chair of the Council.

#### 3. Procedure Statement

3.1. Appraisal focuses on performance against the corporate and personal behaviours required in the role, taken from the Council behavioural framework. Appraisal is both summative and formative, encouraging self-reflection and development and reinforcing accountability.

#### 4. For Council members

- 4.1. The member completes a self-assessment section of the appraisal form, which includes guidance on its use. This is sent to the chair at least one week before the appraisal meeting to allow the Chair to review the members' comments. The Chair may also seek written input from the chair of any committee or working group that the member has served on during the relevant period. If the member has chaired a committee during the relevant period, written input may be sought from the members of that committee. If the member has not had involvement of this kind, the Chair may seek written input from the Council member currently designated to act as Deputy Chair of the Council. The Chair may also seek written input from the Chief Executive & Registrar which would be disclosable to the member concerned on request and should be based on examples of the member's behaviour.
- 4.2. The member has an appraisal meeting with the Chair, including constructive specific feedback from the Chair to the member and from the member to the Chair. Objectives and learning and development needs are reviewed, identified and recorded through the self-assessment and the appraisal meeting.

- 4.3. The Chair completes and approves the remainder of the appraisal form with an overall assessment of the member's performance and sends it to the member asking them to agree it as a fair reflection of their discussion.
- 4.4. If the member is not satisfied with the completed form, the Chair will discuss the comments with the member in further detail. In the unlikely event that the member and Chair remain unable to agree on the comments, this should be recorded in the form.
- 4.5. New Council members also have a mid-year review with the Chair during their first year of office. This is documented but does not follow the full appraisal process.

### 5. For the Chair

- 5.1. The Chair has a 360° appraisal which is facilitated by an external provider. The process is conducted in greater depth on alternate years, such that the more in-depth appraisal could inform a decision of reappointment of the Chair.
- 5.2. In those years where a more in-depth appraisal is conducted, up to eight people will be selected to provide feedback of the Chair's performance. The reviewers would include the Chair of the Audit & Risk Committee, the Chair of the Remuneration Committee and the Chief Executive & Registrar. Others will be selected randomly from among the following groups:
  - Council Members;
  - the executive team; and
  - external stakeholders who have had relevant contact with the Chair during the period under review.
- 5.3 Each person providing feedback will receive a form for completion, accompanied by guidance. The collated responses and Chair's self-assessment are used to inform an appraisal meeting with two Council members who have confirmed that they do not intend to seek reappointment, facilitated by an external provider. Objectives and learning and development needs are reviewed, identified and recorded through the self-assessment and appraisal meeting. Following the meeting, the two Council members produce a report comprising the collated feedback on the Chair, the Chair's self-assessment and a summary of the appraisal meeting itself. This is sent to the Chair for sign-off.
- 5.4 In the intervening years, up to five people will be selected to provide feedback on the Chair's performance. The reviewers would include the Chief Executive & Registrar and either one or both of the chairs of the Audit & Risk Committee and the Remuneration Committee. Others would be selected randomly from among each of the groups listed in 5.2 above. Each person providing feedback will receive a form for completion, accompanied by guidance. Responses are collated by the Governance team. The Chair also completes a self-assessment form. Responses are sent to the external provider for collation into a feedback report to inform an appraisal meeting of the Chair

and the external provider. Objectives and learning and development needs are reviewed, identified and recorded through the self-assessment and appraisal meeting.

5.5 Following the appraisal meeting, the external provider produces a report comprising the collated feedback on the Chair, the Chair's self-assessment and a summary of the appraisal meeting itself. This is sent to the Chair to sign-off.

### **Policy details**

Policy reference	GPHC0032		
Version	2		
Policy author	Matthew Hayday		
Approved for issue by	Council – 14/04/16		
Effective from	14 April 2016	Next review date	April 2022

### Version control tracker

Version	Approved date	Description of change	Amendments by
1	14/04/16		Matthew Hayday, Head of Governance
2		Updated procedure into new template style, changed reference from GPr/2016/135 to GPHC0032. Updates to language	Janet Collins, Governance Manager



General Pharmaceutical Council 25 Canada Square, London E14 5LQ www.pharmacyregulation.org General Pharmaceutical Council



# **Meeting paper**

Council meeting on Thursday, 16 May 2019

**Public Business** 

# **Council member appointments 2020**

#### **Purpose**

To consider recommendations on the process for filling Council member vacancies arising in March 2020

#### Recommendations

The Council is asked to:

- i. agree the process to be used for filling whatever number of Council member vacancies require open competition in March 2020;
- ii. note the selection criteria and competencies for new Council member appointments at Appendix 1 and that these will be updated in discussion with Council; and
- iii. note the next steps in the appointments process and timetable.

#### 1. Introduction

- 1.1. On 31 March 2020, one lay and two registrant Council members will complete their second terms of office. The vacancies thus created will need to be filled using an open competition process which, in order to keep the balance of Council as required by statute, will recruit one lay member and two registrant members.
- 1.2. Council will have to make a decision on another occasion about the potential use of a reappointment process in respect of two other Council member posts, where the current members concerned will be eligible to be considered for re-appointment, subject to the Council's decision at a future meeting.
- 1.3. Our role in the recruitment of new members is to assist the Privy Council to make the appointments. The appointments process will be carried out in accordance with the Professional Standards Authority's (PSA) 'Good Practice in Making Council Appointments' guidance, the recent updates to that guidance and the principles of merit, fairness,

transparency and openness and inspiring confidence. The Council is responsible for ensuring that the appointments process is undertaken appropriately and in a timely manner, and for allocating sufficient resources to it.

1.4. This paper is the first step in the appointments process for 2020. It provides an overview of the proposed recruitment process; outlines proposals to secure an executive search agency to manage the process; confirms part of the membership of the selection panel; and reminds members of the current selection criteria and competencies.

# 2. Key considerations

#### (a) The recruitment process

- 2.1. For the 2019 process, we used the services of an executive search agency to manage the process. This helped to increase the diversity and calibre of candidates and reduced the administrative burden on the Governance team, which was considerable when the entire process was handled in-house. The use of an external agency also means that staff and panel members see only redacted documentation which further reduces the risk of any bias in the process.
- 2.2. We therefore propose to recruit an executive agency via competitive tender following the usual procurement processes. The tender will open shortly.

#### (b) Selection criteria and competencies

- 2.3. The selection criteria and competencies used to select Council members should reflect the current and expected future needs of the Council. In line with PSA guidance, it is good practice to review these regularly. The criteria must not directly or indirectly discriminate against, or deter applications from, any particular group.
- 2.4. For the 2019 round, the Governance team and the Chair reviewed the skills mix of the Council cohort and identified certain gaps. In order to address these gaps, we included the following desirable criteria in the 2019 recruitment:
  - significant NHS management or leadership experience (registrant members)
  - experience of working as a pharmacy technician
  - experience of technology developments in healthcare (registrant and lay members)
  - patient or carer experience (lay members)
  - experience of pharmacy education development or delivery (registrant members)
- 2.5. With five new members of Council having recently joined, we need to consider the skills mix needed for the 2020 recruitment round. We will be conducting a skills audit to identify any

areas where we will need to replace or recruit skills and will come back to Council with suggested desirable criteria. It is unlikely that we will recommend changes to the essential criteria or core competences. The current competencies are attached at Appendix 1 for reference.

#### (c) The selection panel

- 2.6. The role of the selection panel is to assess candidates against the published criteria, in accordance with the published process, and decide which candidates to recommend to the Privy Council for appointment.
- 2.7. The PSA's guidance suggests that selection panels should consist of at least three and no more than five members and should be credible to inspire confidence in the integrity of the process. Panels must also include at least one member who is independent of the regulator in order to bring an impartial perspective.
- 2.8. The 2019 panel was composed of the Chair of Council (in line with the PSA guidance that this is usually appropriate), a registrant member and a panel Chair who had undertaken their respective roles for the GPhC previously and a new independent member. The new independent member proved highly successful and we are pleased that she has agreed to take part again. We will also continue to include the Chair of Council.
- 2.9. In line with the PSA guidance on the maximum number of times that panel members should be used, we need to find a new Chair for the panel and a new registrant member for this round. This process is underway.

#### (d) Time commitment and remuneration

2.10. No changes are proposed to the existing time commitment and remuneration packages for the Council member roles.

#### (e) Timetable and next steps

- 2.11. The estimated timeline for the campaign is approximately nine months from initial advertisement to taking office in April 2020. This timetable includes the required stages of the PSA scrutiny process and the Privy Council approval process, with the confirmation of Council appointments expected in February 2020.
- 2.12. Subject to Council's approval of the proposed approach, we will update the PSA and the Privy Council about our plans and the timetable for this work. We intend to submit the initial 'Advance Notice of intent to recommend appointment' to the PSA shortly after this meeting, with Council's approval. We have already notified the PSA of the numbers of

upcoming vacancies and when these need to be filled. Should the number of vacancies change, there is time to amend the process as required.

# 3. Equality and diversity implications

- 3.1. In designing the recruitment process and selection criteria and competencies for the 2020 appointments, we must consider how to attract a broad, diverse range of suitably qualified candidates, as well as the wider need to conduct the recruitment and selection processes in line with good practice in relation to equality and diversity.
- 3.2. Our equality and diversity strategy will include (but is not limited to) the following key elements:
  - Using an external agency to avoid any direct, associative, perceptive or indirect discrimination and to increase the diversity of the candidate talent pool
  - Designing our advertising campaign to ensure broad appeal and to identify a diverse field
  - Using diversity-focussed jobs board to source candidates from traditionally underrepresented groups
  - An accessible application form (available in different formats on request) including comprehensive guidance for all applicants
  - Offering reasonable adjustments to meet the needs of individual candidates and reminding candidates about this at different points in the process
  - Ensuring the selection criteria and competencies have been reviewed and where appropriate changes identified from previous processes, to allow more accessibility and to 'widen the net' to attract more applicants
  - Ensuring that all application forms are redacted to remove the names of candidates and any other information by which they may be identifiable
  - Ensuring the selection and decision-making processes are objective, fair and unbiased with robust independent quality assurance established
  - Ensuring the selection panel have an understanding and commitment to equality, diversity and inclusion
  - Ensuring panel members have had unconscious bias training
  - Keeping equality and diversity monitoring data separate from the main application forms and ensuring that these are not used in the selection process

- Providing equality and diversity monitoring data to the PSA as part of their assurance of the process
- Reviewing our equality and diversity monitoring data form to ensure that this remains appropriate and in line with legal and good practice requirements
- Declaring and recording where a candidate is known by a member of the panel (in a professional and/or personal sense)

#### 4. Communications

4.1. The PSA requires vacancies to be advertised for at least four weeks, to give potential candidates sufficient opportunity to see the advertisement and apply. We propose to advertise for longer than the required four weeks as the advertising period will run over the summer. The advertising strategy and communications campaign for the recruitment process will be designed to attract a strong and diverse field of suitable candidates. We will review the data from the 2019 campaign, alongside the equality and diversity monitoring data, to identify where further steps could be taken to increase the diversity of applicants.

#### 5. Resource implications

5.1. Provision has been made for the recruitment and selection campaign, including the use of an external agency, in the budget for 2019-20.

# 6. Risk implications

- 6.1. An appropriate and robust process for recruiting and selecting Council members is an essential step in ensuring good governance within the GPhC.
- 6.2. It is essential that our procedures meet the requirements of the PSA's Section 25c scrutiny process. Failure to ensure that our appointment process meets the four principles of merit, fairness, transparency and openness, and inspiring confidence in regulation means that the PSA may not have confidence in our process. This would result in the Privy Council not making the appointments we recommend.

# 7. Monitoring and review

7.1. Council will be kept updated and informed on the appointments process as this moves forward.

# **Recommendations**

The Council is asked to:

- i. agree the process to be used for filling whatever number of Council member vacancies require open competition in March 2020;
- ii. note the selection criteria and competencies for new Council member appointments at Appendix 1 and that these will be updated in discussion with Council; and
- iii. note the next steps in the appointments process and timetable.

#### Janet Collins, Governance Manager janet.collins@pharmacyregulation.org

Tel. 020 3713 8139

#### Laura McClintock, Chief of Staff laura.mcclintock@pharmacyregulation.org

Tel 020 3713 8079

25 April 2019

# Appendix 1

# **Council members – selection criteria and competences**

	Criterion	Description
E1	Working within a framework	An appreciation of and commitment to protecting, promoting and maintaining the health, safety and wellbeing of patients and the public
E2	Analytical and decision making skills	The ability to identify problems, options and solution, considering risks, consequences and impact. Ability for forward- thinking and to see the bigger picture
E3	Collaborative and professional communication skills	The ability to work with others, to challenge, listen and question constructively. Understanding of alternative perspectives and ability to influence in the pursuit of quality and performance
E4	Integrity and respect	Gains the trust of others, principled and values-based actions. An understanding of and commitment to good governance and to the Nolan principles of public life

# Essential Criteria – all candidates must demonstrate the following:

# In addition, registrant applicants must also demonstrate the following:

E5	Pharmacy professional	Up to date knowledge and understanding of the practice of
	practice	pharmacists and/or pharmacy technicians and an awareness of
		the factors influencing it

#### Desirable criteria

These will be reviewed. For reference, the 2019 desirable criteria identified were:

		Reg.	Lay	All
D1	Significant NHS management or leadership experience			
D2	Experience of working as a pharmacy technician			
D3	Experience of technology developments in healthcare			$\checkmark$
D4	Patient or carer experience, or experience of representing patient or carer views		~	
D5	Experience of pharmacy education development or delivery	$\checkmark$		
D6	Community pharmacy experience	$\checkmark$		

# Competencies for Council members

Competence	Evidence
C1 Personal qualities	<ul> <li>Willing to accept and uphold own accountability and willing and able to hold others to account for performance of delegated responsibilities</li> </ul>
	<ul> <li>A high level of probity, integrity, objectivity and fairness</li> </ul>
	<ul> <li>Commitment to equality, diversity and inclusion</li> </ul>
	- The ability to maintain confidentiality
	<ul> <li>High level of motivation and a willingness to constantly review and improve performance</li> </ul>
	<ul> <li>The ability to display credibility across and beyond the registered pharmacy professions</li> </ul>
C2	- Thinks clearly and creatively
Intellectual flexibility	<ul> <li>Able to analyse complex information – considering the bigger picture as well as the detail – and arrive at sound judgements</li> </ul>
	<ul> <li>Able to understand who the GPhC's key interest groups are and their drivers and priorities</li> </ul>
	- Willing to modify thinking in light of new information and dialogue
C3	<ul> <li>Can influence and persuade others using evidence and well- reasoned arguments</li> </ul>
Effective influencing and communication	- Capacity to give and take advice
	<ul> <li>Able to test and probe constructively and effectively to achieve the best outcomes for the GPhC and its statutory functions</li> </ul>
C4	- Builds constructive relationships and works effectively as a team
Effective team working	<ul> <li>Understands and maintains the separation between the non- executive and executive function</li> </ul>
	- Promotes and supports the corporate decisions of Council
	- Actively seeks the differing views of others and respects those views

General Pharmaceutical Council



# **Meeting paper**

Council on Thursday, 16 May 2019

# Public business Update on the Gosport Independent Panel Report and the Professor Sir Norman Williams Review of Gross Negligence Manslaughter in Healthcare

# Purpose

To provide Council with a progress update on our ongoing work following a number of developments in the external context throughout 2018/19

# **Recommendations**

The Council is asked to note the progress update along with our ongoing work and collaboration in this area.

# 1. Introduction

1.1. Over the past year, a number of important reports of independent inquiries and reviews have been published, setting out how patients and their families have been failed or let down by healthcare professionals, regulators and other agencies, and by a wider system of regulation, which is intended to put patient safety at its heart. Since the publication of these reports, we have been providing the Council with regular progress updates about our work in these areas, through formal papers and verbal updates at Council meetings.

# 2. Key considerations

#### The report of the Gosport Independent Panel

2.1. The Gosport Independent Panel was set up to address concerns raised by families over a number of years about the initial care of their relatives in Gosport War Memorial Hospital and the subsequent investigations into their deaths. The Panel found that during a certain period at Gosport, there was a disregard for human life and a culture of shortening the lives of a large number of patients by prescribing and administering dangerous doses of a hazardous combination of medication not clinically indicated or justified.

- 2.2. The full report was published on 20 June 2018 and contained information about how pharmacy services were provided at the hospital, including the roles and responsibilities of the pharmacists at the time of the events covered by the report. In July 2018, we updated the Council on how we were working collaboratively across the across the organisation, and externally, to ensure that a comprehensive plan was put together for a co-ordinated response to all the pharmacy and pharmacy regulation issues to which the report relates. At that point, we shared a high-level summary action plan setting out our key priorities in the short, medium and longer term. We also indicated that we would revise our action plan in light of any official Government report and recommendations expected in the Autumn.
- 2.3. In December 2018, we provided a further progress report to Council, which included publishing a statement on 21 November to welcome the government's official response to the Gosport Report and the recommendations for the sector. We also signalled our intention to lead a joint piece of work to develop a collective tool, which brings together the key pharmacy themes from the report in one framework along with the existing resources and work under each theme. The intention was to highlight how current pharmacy arrangements work to prevent a similar situation happening in the future and to enable the pharmacy regulatory and professional leadership bodies to identify any additional next steps or actions.
- 2.4. Since the last substantive update to Council in December, we have taken forward the following actions:
  - a. Continued to liaise with the officers involved in Operation Magenta, which is the Eastern Policing Regions response to the report, to ensure there is, where appropriate, a joinedup approach to any ongoing work. As recently announced on 30 April 2019, Operation Magenta's assessment phase has now been completed and the care provided to patients who died at Gosport will be subject to a full police investigation. We will continue to assist the authorities with this investigation going forward and where we are able to do so.
  - b. Assisted with the RPS Medication Safety 'Lessons from Gosport' event, which included facilitating table discussions as well as a presentation by our Chief Executive and Registrar. The event was attended by a variety of different pharmacy professionals, including Chief and Lead pharmacists and pharmacy technicians from many organisations and Trusts.
  - c. Published our joint reflection and learning resource to support everyone across the pharmacy to learn the lessons from the Gosport Independent Panel report. This also took account of the differences across the three countries we regulate. We shared the publication with key stakeholders across the professions and more widely, and the work received many supportive and positive social media responses.

- d. Continued to liaise closely with the Department of Health and Social Care (DHSC) to provide a written progress updates for the families affected by the events at Gosport, for the purpose of the ongoing family forum meetings.
- e. Attended the DHSC Gosport stakeholder meetings on 14 March 2018 and 9 May 2019 along with other key stakeholders.
- f. Agreed a confidentiality agreement with the Gosport Transition Team (on behalf of DHSC), to confirm the extent of the data and information available to inform any future regulatory action. The aim of the agreement is to enable us to obtain any relevant information from the Gosport records, subject to appropriate legal and ethical safeguards.
- g. Published an article in our e-bulletin Regulate, to raise awareness of the issues within the Gosport report and signpost pharmacy professionals to the learning and reflection resource.
- h. Developed an internal resource on the key fitness to practise themes within the report, to feed into the development of our wider fitness to practise strategy and to share the learnings with colleagues in other parts of the organisations.
- i. Produced new operational fitness to practise guidance on undertaking parallel investigations, so that investigations proceed promptly without delay which was a key issue in both the Gosport report and a number of other recent reviews.
- 2.5. More broadly, we have also sought to ensure that the themes and issues within the Gosport report are not considered in isolation and embedded in other areas of our regulatory and policy work, where possible. For example, we have considered the issue of anticipatory prescribing in the context of our work on new guidance for independent prescribers as well as recognising some of the issues raised in Gosport through the development of a joint statement on reflective practice.
- 2.6. Additionally, when responding to the PSA consultation on the new Standards of Good Regulation, we recommended that the new Standards assess how appropriate and consistent action is taken by the healthcare regulators to address the important issues identified through recent public reports and inquiries. We were pleased to see that this has been included in the new Standards and that the PSA will be assessing how regulators respond to external reports, even if these do not raise direct concerns about the regulator or its registrants.

#### Williams review into gross negligence manslaughter in healthcare

- 2.7. On 6 February 2018, the Secretary of State for Health and Social Care announced that he was asking Professor Sir Norman Williams to conduct a rapid policy review into the issues pertaining to gross negligence manslaughter (GNM) in healthcare. The GPhC attended the evidence gathering session on 21 March 2018 and published a written brief on 6 April 2018, which informed our evidence. The Panel subsequently published its full report on 11 June 2018.
- 2.8. The Government accepted all the report's recommendations, noting that many of the recommendations require input and engagement from across the health and social care, legislative and judicial systems. In order to ensure these recommendations are taken forward, DHSC convened an implementation working group, of which we are current members.
- 2.9. The working group is currently focussing on two key recommendations:
  - a. **Consolidating expertise of gross negligence manslaughter (GNM) in healthcare settings in support of investigations**— this includes the drafting of a new Memorandum of Understanding for the investigation of potential GNM cases. The draft MOU is designed to ensure greater consistency in the way suspected GNM cases are handled; facilitate efficient and effective coordination of an appropriate approach and investigation; ensure that information is disseminated to appropriate organisations quickly and efficiently; ensure evidence is secured as necessary; and, allow steps to be taken quickly to ensure that the public and patients are protected from any ongoing risks.
  - b. **Developing an agreed and clear explanatory statement of the law on GNM** the group also includes representatives from the Crown Prosecution Service (CPS), the coroner services, Treasury Counsel and healthcare defence organisations. There is ongoing work to develop a clear position statement on the law of GNM, to ensure there is a common understanding of the high threshold at which the bar for prosecution is set.
- 2.10. Implementation of these recommendations will facilitate a clearer understanding of the law of gross negligence manslaughter and a systemic approach the investigation of potential GNM deaths in a healthcare setting. DHSC have also advised that the management of additional recommendations that are dependent on the completion of these two key recommendations will follow once these are finalised.
- 2.11. The working group has also explored with DHSC the potential impact for other UK countries or other options for joint working. DHSC indicated that the scope of the Williams Review is England and Wales. However, if there are learnings or links that could be made across other countries then this should be explored.

2.12. Finally, there were also a number of recommendations within the report for the Professional Standards Authority. This includes reviewing how the impact on public confidence is assessed in reaching fitness to practise decisions about individual healthcare professionals and develop guidance to support consistent decision making in this area. The report also recommends that the PSA review the outcomes of fitness to practise cases relating to similar incidents and circumstances considered by different regulators. This review should seek to determine the extent and reasons for different fitness to practise outcomes in similar cases and, if appropriate, recommend changes to ensure greater consistency. We are continuing to contribute to the PSA's ongoing research and evidence gathering around these themes.

# 3. Equality and diversity implications

3.1. The Williams Review made a number of specific recommendations in relation to equality and diversity in fitness to practise proceedings. In particular, the Williams Review panel supported the PSA's intention to introduce, as part of its Standards of Good Regulation, equality and diversity standards for professional regulators. In responding to the relevant PSA consultation, we were supportive of this change and agreed that there is great value in understanding equality data relating to our registrant body and continuing to ensure that our processes are fair. Equality, diversity and inclusion has now been incorporated into the new PSA Standards of Good Regulation and will be assessed fully in the 19/20 performance review cycle.

# 4. Communications

4.1. We are continuing to monitor the media and parliaments/assemblies, including parliamentary questions, debates and relevant committees across the three countries that we regulate. We will continue to raise awareness of the reflection and learning materials we have developed, including through our wider engagement events, where appropriate.

#### 5. Resource implications

5.1. There are no additional resource implications associated with this work as it currently stands. This will of course be monitored in line with any future regulatory action we may need to take in response to the reports and recommendations, or the work of others.

#### 6. Risk implications

6.1. It is essential that we consider the wider lessons learned, to ensure that we are regulating in a way that continues to be fit for purpose and meets the expectations of the public.

#### 7. Monitoring and review

7.1. We will continue to provide regular progress updates to the Council as our work in this area continues.

# **Recommendations**

The Council is asked to note the progress update along with our ongoing work and collaboration in this area.

Laura McClintock, Chief of Staff General Pharmaceutical Council

laura.mcclintock@pharmacyregulation.org

Tel 020 3713 8079

8 May 2019