

# Consultation on remote hearings: analysis report



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# Executive summary

## Background

Between 16 November 2021 and 8 February 2022, we consulted on a proposal to continue to hold remote hearings where it is fair and practical to do so.

We delivered this consultation through a consultation survey which received 481 responses: 460 from individuals and 21 on behalf of an organisation. We also received 2 responses from organisations writing more generally about their views, bringing the total number of respondents to 483.

We also carried out a survey of our online public panel members. This was open from 11 January to 8 February 2022 and received a total of 148 responses.

## Key issues raised in responses

### Continuing remote hearings

Our proposal to continue remote hearings was met with a high level of agreement with around three quarters of respondents (78%) supporting this recommendation. Disagreement to continue remote hearings was lower at around a tenth of respondents (12%) either disagreeing or strongly disagreeing.

The vast majority of online public panel respondents were in favour of the proposal with 91% agreeing with the proposal to continue remote hearings and 75% having the same level of confidence in a remote hearing as they would have in a hearing held in-person.

### Advantages of remote hearings

Most respondents to this question were supportive of the GPhC's proposal to continue to hold remote hearings. Setting out their reasons, many respondents highlighted the cost-effectiveness of remote hearings in terms of saving both money and time on travel into the London office for a face-to-face hearing. Some saw remote hearings as a more efficient process enabling cases to be solved quicker, therefore maintaining public and patient trust in the profession and fitness to practise process. Those who favoured remote hearings noted remote hearings are easier and more flexible for participants in terms of scheduling dates and being able to attend remotely. Similarly, many respondents agreed remote hearings allow improved accessibility for participants and would also increase attendance. Remote hearings were seen to reduce the risk of COVID-19 as well as accommodate current and future COVID-19 restrictions so the fitness to practise process can continue if restrictions were changed. Respondents felt there were many benefits of participants attending a hearing remotely in a familiar environment as well as having less environmental impact than face-to-face hearings.

### Disadvantages of remote hearings

Respondents to this question felt the main risk of remote hearings was the risk of technological problems such as poor Wi-Fi connection which could impact the hearing. Many respondents reported the loss of body language and non-verbal signs when on camera as opposed to face-to-face hearings which could cause disadvantages particularly to certain groups. Many respondents highlighted remote hearings can feel impersonal and isolating to participants and could impede effective communication in

the hearing in general. We heard that online connection is not accessible for all as not all participants will have access to the required equipment and remote technology, they may also lack the required technical competency which could cause disadvantage. Some respondents took issue with participants not having an appropriate home setting to attend a remote hearing.

We heard remote hearings can be perceived as less rigorous and provide less assurance both to the public and participants in terms of the process not being as robust as it may be in a face-to-face hearing.

We also heard some respondents felt remote hearings offer less support for witnesses or poorer quality support for registrants as the representatives are not in person it may feel the support is lacking over video call.

### **Circumstances of remote hearings**

Around half of respondents to this question felt there were circumstances when a hearing should not be held remotely. Expanding on this, the primary concern highlighted by many respondents was that participants' preference on whether a hearing is remote or face-to-face should be considered. This included both the registrant and witnesses. Respondents also identified the level of seriousness and the complexity of the case as being key considerations arguing that the more complex and serious cases should not be held remotely. We heard that remote hearings are not always practical or favoured by those with certain disabilities (such as hearing or visual impairments) or accessibility issues and that this should be considered on a case-by-case basis.

Just over three quarters (77%) of our online public panel respondents agreed that when we are considering holding a hearing remotely, the person who raised the concern should be asked for their view on whether that hearing should be held remotely or in-person.

### **Impact of the proposed changes**

#### **Impact on patients and the public and pharmacy professionals**

Respondents assessed the impact the proposals would have on patients and the public and pharmacy professionals. A third of respondents (30%) felt the proposals would have a positive impact on patients and the public and 42% felt they would have a positive impact of pharmacy professionals. Many respondents said the proposals would have a positive and negative impact on pharmacy professionals (32%) compared to 22% who felt this way regarding patients and the public.

When discussing the impact of remote hearings on patients and the public and on pharmacy professionals, respondents echoed many of the themes identified in the sections above. A large proportion of respondents agreed remote hearings tend to speed up the fitness to practise process allowing outcomes to be heard quicker which can benefit the public in terms of ensuring public and patients' safety as well as benefitting pharmacy professionals who receive an outcome to the case quicker. We heard that remote hearings can be cost effective to registrants' and it may be easier to arrange cover at work due to the time saved on travelling to and from the hearing. However, some respondents felt remote hearings may be less rigorous and provide less assurance to participants than a face-to-face hearing. Many respondents recognised remote hearings may offer increased flexibility for participants and increased attendance due to the lack of requirement to travel into London and more manageable scheduling of dates and times for hearings. Similarly, we heard remote hearings can be less intimidating and stressful for participants and that the preference of participants should be taken into consideration when determining how the hearing is held.

Respondents to our online public panel survey were more positive with over half (56%) stating that remote hearings would have a positive impact on patients and the public. A further 26% said the impact would be both positive and negative and only around a tenth (12%) felt there would only be a negative impact on patients and the public.

Over half of online public panel respondents (51%) also felt holding some hearings remotely would have a positive impact on pharmacists and pharmacy technicians. Almost a quarter of respondents (24%) felt this would have both a positive and negative impact but just over a fifth of respondents (22%) felt the impact on pharmacists and pharmacy technicians would only be negative.

### **Impact on people sharing protected characteristics**

Many respondents felt the GPhC's proposal would not have an impact on people sharing protected characteristics, with the exception of age, disability, and pregnancy/maternity. Over a third of respondents felt remote hearings would positively benefit disabled people (37%) and we heard this could be due to the improvement of accessibility. Nearly a third of respondents (45%) felt those pregnant or on maternity leave would be impacted positively, we heard this could be due to the removal of the requirement to travel into London, more flexibility and easier arrangement of childcare. Over a quarter of respondents (29%) felt older people may be both advantaged and disadvantaged and this could depend on both their physical ability and their technical skills. Respondents highlighted some participants, such as those with dexterity problems, or sight/hearing impairments, may experience accessibility issues in relation to remote hearings and therefore each participants' needs should be considered and assessed on a case-by-case basis.

# Introduction

## Policy background

In our role as the regulator of pharmacy professions and pharmacy premises, one of our jobs is to investigate concerns about pharmacists and pharmacy technicians:

- who may pose a risk of harm to patient safety, or
- whose actions could undermine public confidence in the pharmacy professions and the delivery of pharmacy services

If we investigate a concern and decide there is evidence to show that a pharmacy professional's fitness to practise may be impaired, the case may need to be referred for a hearing before a committee.

Before March 2020, all our committees heard cases in person at our hearing centre in London. As a result of the national COVID-19 lockdown – with restrictions first imposed in March 2020 – we had to immediately close our offices and hearing centre. We therefore stopped holding 'in-person' hearings and started holding hearings remotely by video link.

Before holding any hearing in this way we asked the individual concerned or their representative for their consent. If we did not get this consent, the hearing was postponed. While some hearings were postponed, consent was given in most cases, which meant we could hold those hearings by video link. Early feedback from participants involved in these hearings was mostly positive.

In August 2020, as national restrictions were eased, we were able to hold a number of in-person hearings at our hearing centre. So from August 2020, we had a mixture of in-person hearings and ones held by video link, with most hearings taking place by video link.

In December 2020, following an increase in the COVID-19 infection rate, we decided to stop holding in-person hearings. So from December 2020, all our hearings were held by video link. That remained the case until May 2021 when we began holding in-person hearings again. Since May 2021, we have again had a mixture of in-person hearings and ones held by video link.

### Emergency rules and draft rules

To help us respond to the challenges brought about by the COVID-19 pandemic, we were granted – along with other regulators – changes to our procedural rules. These gave us greater flexibility to perform our statutory roles.

One of the rule changes allowed us to hold hearings remotely. This was a temporary provision which ended on 1 May 2021. You can find [\*\*details of our procedural rules\*\*](#) on the 'legislation' page in the 'About us' section of our website.

We have been talking to the Department of Health and Social Care about further draft changes to our procedural rules which would allow us to carry on holding hearings by video link (as well as in person). They have not yet had final approval before being laid in the Westminster and Scottish parliaments.



## Our reasons for wanting permanent changes to our rules

Since March 2020 we have held most of our hearings by video link and this has proved to be successful in a number of ways. For example, we found that registrants seem more likely to attend a hearing that is held remotely than they are to attend one in person.

Feedback we have received from participants has mostly been positive and supported the idea of remote hearings. We have heard from other regulators that they have had similar experiences in holding hearings remotely.

Not all hearings are suitable for being held remotely and there can be many benefits in holding a hearing in person. The proposed draft rules would allow the chair of the hearing to decide whether to hold a remote or an in-person hearing. To make sure we were consistent in making these decisions we will provide new policy and guidance on what to consider when making them. For example, the chair should take into account any potential impact a remote hearing would have on the hearing's participants.

To enable consistency of decision-making, when holding remote hearings during the lockdown period, we produced and published interim guidance. This sets out criteria for deciding whether a hearing is suitable to be held remotely. Two examples of this are:

- how complex are the allegations and evidence in the case?
- do the parties have access to technology that will allow them to take part effectively in a remote hearing?

You can see this interim guidance in the hearings section of our website.

We have also produced and published [separate guidance explaining the procedure at remote hearings](#). This guidance supports people attending a remote hearing under the emergency rules. We propose to update this guidance if the proposed rule changes are approved.

## Decision to undertake a 12-week public consultation

Prior to undertaking a 12-week public consultation, we had already received some very useful initial feedback from key pharmacy and patient-focused stakeholders on whether there should be a change to our rules to allow us the flexibility to deliver remote hearings. In planning our longer-term approach to remote hearings we decided it was necessary to undertake a 12-week public consultation to get feedback from all stakeholders and the wider public. We were particularly interested in hearing views on the impact remote hearings have upon people who share protected characteristics, as defined in the Equality Act 2010.

For more detail on the changes we are proposing, see [\*\*Appendix 1: Summary of our proposals\*\*](#).

# Analysis of consultation responses and engagement activities

In this section of the report, the tables show the level of agreement/disagreement of survey respondents to our proposed changes, or the aspects respondents felt we should modify. In each column, the number of respondents ('N') and their percentage (%) is shown. The last column in each table captures the views of all survey respondents ('Total N and %'). The responses of individuals and organisations are also shown separately to enable any trends to be identified.

NB. See [Appendix 2: About the consultation](#) for details of the consultation survey and the number of responses we received, [Appendix 3: Our approach to analysis and reporting](#) for full details of the methods used, [Appendix 4: Respondent profile](#) for a breakdown of who we heard from, and [Appendix 5: Organisations](#) for a list of organisations who responded. [Appendix 6: Consultation questions](#) contains a full list of the questions asked in the consultation survey.

## 1. Continuing remote hearings

**Table 1:** Views on continuing remote hearings when it is practical to do so (Base: All respondents)

Q1. Do you agree or disagree that hearings should continue to be held remotely when it is fair and practical to do so?	N and % individuals	N and % organisations	N and % Total
Strongly agree	169 (37%)	5 (24%)	174 (36%)
Agree	191 (42%)	13 (62%)	204 (42%)
Neither agree nor disagree	35 (8%)	1 (5%)	36 (7%)
Disagree	25 (5%)	1 (5%)	26 (5%)
Strongly disagree	36 (8%)	(0%)	36 (7%)
Don't know	1 (1%)	1 (5%)	5 (1%)
<b>Total N and % of responses</b>	<b>460 (100%)</b>	<b>21 (100%)</b>	<b>481 (100%)</b>

Overall, a large majority of respondents (78%) agreed that hearings should continue to be held remotely when it is practical and fair to do so. When broken down further, table 1 shows that agreement amongst organisations (86%) was marginally higher than amongst individuals (79%). A higher proportion of individuals (13%) disagreed that hearings should continue to be held remotely in comparison to organisations (5%). A small minority of respondents (1%) indicated that they did not know either way whether hearings should continue to be held remotely.

## 2. Advantages of remote hearings

Respondents were asked to identify the advantages of remote hearings. Around three quarters of respondents left explanatory comments. An analysis of the themes found in their responses is presented below.

### 2.1. Summary of themes

Acknowledging the reasons highlighted in the consultation document for continuing to hold remote hearings, respondents to this question were largely in favour. Many respondents felt that this approach was the most cost-effective method to adopt for both the GPhC and for registered pharmacy professionals and that it would speed-up the hearings process. Many respondents felt this approach would make the hearing process more flexible for participants as well as less intimidating and stressful.

The analysis below presents the themes that emerged from the responses, in order of prevalence, as listed here:

- Reduced costs and time saved on travel
- Increased efficiency of fitness to practise processes
- Remote hearings allow flexibility and are easier for participants
- Remote hearing process is less stressful for participants
- Remote hearings help increase attendance
- Positive environmental impact
- Improved accessibility
- Reduced risk of COVID-19 + Accommodate current/future COVID-19 restrictions
- Benefits of the home setting

### 2.2. Reduced costs and time saved on travel

The most common theme to emerge from the consultation responses was that remote hearings save money for registrants, witnesses and the GPhC, with many respondents citing this as the main benefit. Remote hearings remove the need for travel, saving both time and money, and do not require overnight stays or lengthy periods of time away from work. The GPhC would save money by not needing to reimburse travel and hotel expenses for panellists and witnesses.

### 2.3. Increased efficiency of fitness to practise processes

Many respondents felt remote hearings enable continuation of the judicial process in a more time efficient manner allowing hearings to be expedited. They argued that arranging face-to-face hearings can take longer and be more prone to delays as availability for all parties needs to be considered. For example, it can be more problematic to put into place arrangements that would allow individuals to travel into London such as work cover or childcare.

This theme was more prevalent amongst organisations than individual respondents. We heard from one organisation that the timeliness of processing fitness to practice cases was a concern amongst their members. The organisation reported that remote hearings could help to overcome this by speeding up the process and therefore having a positive impact.

## **2.4. Remote hearings allow flexibility and are easier for participants**

There was strong support for remote hearings as they are perceived to be easier and more flexible for participants. For example, the parties involved can join from their home or a place of their choice which was said to be easier and more convenient. Remote hearings also enable a more convenient and flexible option for participants in terms of scheduling the timings and dates of hearings as there is no need to travel to a specific location and less problems in terms of arranging suitable cover for the workplace. We also heard that remote hearings offer more flexibility to experts who would be able to attend for several hours in between seeing patients which they would be unable to do at a face-to-face hearing.

## **2.5. Remote hearing process is less stressful for participants**

Of those who agreed remote hearings should continue, many respondents felt participants may find the hearing process less stressful as they have not had to travel into London and are able to attend the hearing from their own home or somewhere of their choice. Some respondents recognised participants may feel less intimidated at a remote hearing as they are not in the same room as the panel and other participants. Respondents reported that attending the GPhC Head Office could be nerve-wracking and intimidating and added to the stress of going through a fitness to practise proceeding. This theme was more prevalent amongst organisations than individual respondents.

## **2.6. Remote hearings help increase attendance**

Many respondents thought that remote hearings would increase attendance rates for registrants and witnesses involved. This theme was more prevalent amongst organisations than individuals. The reasons given followed on from the benefits already outlined above. We heard that many respondents felt remote hearings would increase the attendance rates of participants due to the cost and time saved on travelling to and from the face-to-face hearing in London. Some respondents speculated remote hearings would allow certain groups to attend, such as those with children or those who live further out of London. Many organisations felt registrants and witnesses may be better able to engage in a remote process where they may have otherwise struggled to attend a face-to-face hearing for example due to being unable to take a full day out of work. Reducing the stress for participants would also make it more likely for people to engage in the process.

## **2.7. Positive environmental impact**

For those who agreed with the proposal to continue to hold remote hearings, some cited an advantage being reducing carbon emissions and a greener solution due to not being required to travel into London. This would be a particular benefit for any overseas or distant participants who are required to attend a hearing.

## **2.8. Improved accessibility**

Of those who felt remote hearings improved accessibility, the majority felt witnesses and registrants with disabilities may be benefited by remote hearings due to the lack of requirement to travel into the office in London. We heard how remote hearings can also make hearings more accessible for the older generation along with those who are pregnant or on maternity leave.

## **2.9. Reduced risk of transmitting COVID-19 and ease of accommodating future COVID-19 restrictions**

Some respondents spoke about the benefits of remote hearings in terms of reducing the risk of COVID-19 transmissions as well as accommodating future COVID-19 restrictions if they were to come into

effect. We heard remote hearings remove the risk of catching COVID whilst travelling into London to attend a face to-face hearing or whilst in the hearing and therefore reducing transmission of the virus. One individual highlighted remote hearings remove the requirement to wear a face mask which can enable body language to be read more effectively. Expanding on this further, respondents recognised remote hearings would enable cases to continue to take place if future COVID-19 restrictions came back into place, therefore not delaying the fitness to practise process and mitigating the risk to public and patient safety.

### **2.10. Benefits of the home setting**

Many respondents remarked that remote hearings allow the participants to attend the hearing in a familiar and comfortable environment which could help them to feel more at ease and likely to communicate openly. They argued that this could lead to a more effective hearing. We heard how being able to attend a remote hearing in the participants' own home may make them more likely to engage in the process and attend as they are not in surroundings which are unfamiliar or foreign to them which can help to lessen any anxiety associated with a fitness to practise hearing. Attending a remote hearing from home can mean participants are more supported by friends or family during the process and this could potentially lessen the emotional distress.

## **3. Disadvantages of remote hearings**

Respondents were asked to identify the disadvantages of remote hearings. Around two-thirds of respondents left explanatory comments. An analysis of the themes found in their responses is presented below.

### **3.1. Summary of themes**

The most frequent reasons given by respondents was the risk of technical problems and the loss of body language and non-verbal signs. Those who provided more detail for the disadvantages of remote hearings felt that connectivity and information technology issues could potentially hamper the case by causing delays. Many respondents felt internet technology directly brings potential disadvantages to particular groups. Some respondents highlighted remote hearings may be perceived as less rigorous as well as impersonal and isolating. We also heard that support for witnesses and registrants at a remote hearing may not be as robust.

- Risk of technical problems
- Loss of body language and/or non-verbal signs during remote hearing
- Isolating and impersonal experience
- Remote hearings impede effective communication
- Lack of access to required equipment
- Disadvantages of the home setting
- Remote hearings may be less rigorous and provide less assurance to the public
- Participants may lack technical skills
- Remote hearings could result in poorer legal representation for registrants
- Risk of abuse of procedures

- Reduced accessibility
- Remote hearings will provide less support to witnesses
- Negative impact on people with disabilities
- Other comments

### **3.2. Risk of technical problems**

The most common theme identified in responses was the limits and risks of technological problems involved in remote hearings. Many respondents cited a poor internet connection could disadvantage those involved in a remote hearing. Expanding on this, some respondents felt if the connection is lost during the hearing it could lead to delays in the process and therefore delays to the outcomes of the case which could have several knock-on effects. Many respondents highlighted the importance of a strong and stable internet connection to ensure the hearing runs smoothly, which is not always possible, particularly for those who live in more rural areas.

### **3.3. Loss of body language and/or non-verbal signs during remote hearing**

Many of those respondents who felt remote hearings should not continue, felt that body language and non-verbal signs may be missed at remote hearings which can lead to opportunity of miscommunication and misinterpretation. Of those who disagreed with the continuation of remote hearings, some cited an individual may be unable to demonstrate true remorse on video compared to in person which may impact the case outcome. We heard from some respondents that emotions are not fully displayed on a camera as they may be in person.

### **3.4. Isolating and impersonal experience**

Many respondents thought that remote hearings can feel isolating and uncaring for the participants in particular registrants or witnesses. Respondents went onto say not being able to talk to someone face-to-face can cause feelings of isolation and lead to an increase in risk of miscommunication and misunderstanding.

Expanding on this, one organisation highlighted registrants who are not familiar with spending a prolonged period of time on remote technology may find the process more isolating as it may be an online world with which they are unfamiliar. Continuing, if the registrant does not have support at home in a remote hearing, they may feel more isolated unlike a face-to-face hearing where they are more likely to know who they can ask for support.

One individual highlighted they felt the registrant should have the right to see those pursuing the case and the panel members making the decision to the outcome of the case in person to prevent the registrant feeling uncared for.

### **3.5. Remote hearings impede effective communication**

A concern raised by some respondents was that remote hearings may have a negative impact on the effective communication throughout the hearing. Many of these respondents felt communication can be more difficult in an online setting for both registrants and witnesses, which could have an impact on the overall case. They went onto say the audio in the hearing may not always be clear to all participants on the hearing if there are distractions such as connection issues or background noises which are out of control. We heard how some respondents felt certain participants, such as those who are able to

portray themselves better in person may respond better in a face-to-face setting where communication is less likely to be misunderstood or misinterpreted.

### **3.6. Lack of access to required equipment**

The next most common area of concern cited by respondents was that remote hearings can disadvantage those who lack access to the required equipment to attend the hearing remotely. Expanding on this point further, some respondents felt registrants without adequate technology such as a computer with a camera facility could be disadvantaged and this may cause distress.

### **3.7. Disadvantages of the home setting**

This theme was more prevalent amongst organisations. Some respondents felt those who do not have an appropriate home setting to attend a remote hearing would be disadvantaged. A small number of respondents speculated not all registrants have access to a quiet and private space to attend the hearing which could cause distress and anxiety which could go on to affect the case and how the registrant is able to portray themselves. A few respondents felt remote hearings may be carried out in spaces more liable to distractions such as with family or children in the background which is not always avoidable. We also heard the home setting for a remote hearing can compromise the confidentiality of the hearing, particularly if there are other family members in the home setting at the time of the hearing.

### **3.8. Remote hearings may be less rigorous and provide less assurance to the public**

Some respondents who felt remote hearings should not continue, felt remote hearings are a less rigorous process than face-to-face hearings. A small number of these respondents cited remote hearings do not necessarily demonstrate the importance or seriousness of the case which can lead to a lack of public confidence in the profession. Respondents also mentioned remote hearings may lead to a potential weaker oversight of both governance and fitness to practise matters. This theme was also identified under impact - see section 5.3.

### **3.9. Participants may lack technical skills**

Some respondents talked about the impact poor technical competency can have on remote hearings with many citing that different parties involved in the hearing may have different levels of technical skills which could either benefit or disadvantage them. A small number of these respondents felt some may find the remote hearing process intimidating and more stressful due to the lack of technical ability.

### **3.10. Remote hearings could result in poorer legal representation for registrants**

Several respondents felt remote hearings offer poorer quality support and legal representation for registrants, with a few highlighting the fairness and transparency of the hearing could be affected negatively by poor quality support. Some respondents reported remote hearings may lead to difficulty in communication between the registrant and their legal representation.

One organisation felt the lack of physical presence of the legal representation may cause the registrant anxiety and a lack of assurance. This theme was more prevalent amongst organisations.

### **3.11. Risk of abuse of procedures**

We heard that some respondents felt remote hearings can be more prone to risk of abuse, in terms of witnesses being influenced by others in the room during the hearing and the possibility of being



coerced. We also heard that there is a potential for the remote hearing to be recorded without the GPhC's knowledge or permission which could cause issues.

### **3.12. Reduced accessibility**

In commenting on the question on disadvantages, some respondents felt particular groups of people may have poorer access to remote hearings, for example those with sight and/or hearing problems or those with limited dexterity. This theme was more prevalent amongst organisations. This theme was also identified under section 3.13.

### **3.13. Remote hearings will provide less support to witnesses**

Some respondents felt remote hearings offer less support for witnesses and they may not receive as much assistance and help on a remote hearing. Expanding on this was the need to inform witnesses of the process in more detail for a remote hearing in advance so they are aware of the process and procedure and can ask questions beforehand if they require clarification. This theme was more prevalent amongst organisations.

### **3.14. Negative impact on people with disabilities**

A concern raised by a few respondents was those with disabilities may be disadvantaged by remote hearings. Many respondents highlighted there are different disabilities to consider such as hearing and visual impairments as well as physical disabilities which can all be impacted differently. Those with a hearing disability may not be able to lipread on a remote hearing as well as they may in a face-to-face hearing which could disadvantage them and lead to misinterpretation and impede communication. This theme was more prevalent amongst individual respondents.

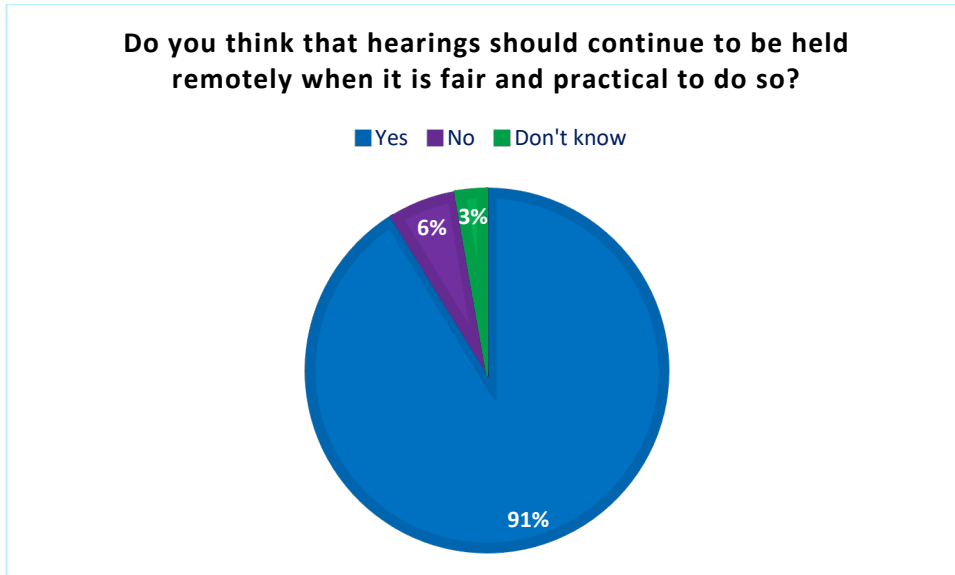
### **3.15. Other comments**

We heard from a small number of respondents who felt registrants should have a right to a face-to-face hearing if they would like one and this should be considered when establishing whether a hearing is held remotely or face-to-face. A small minority of respondents highlighted the level of both complexity and seriousness of the case should also be considered when establishing if remote hearings could disadvantage a case.



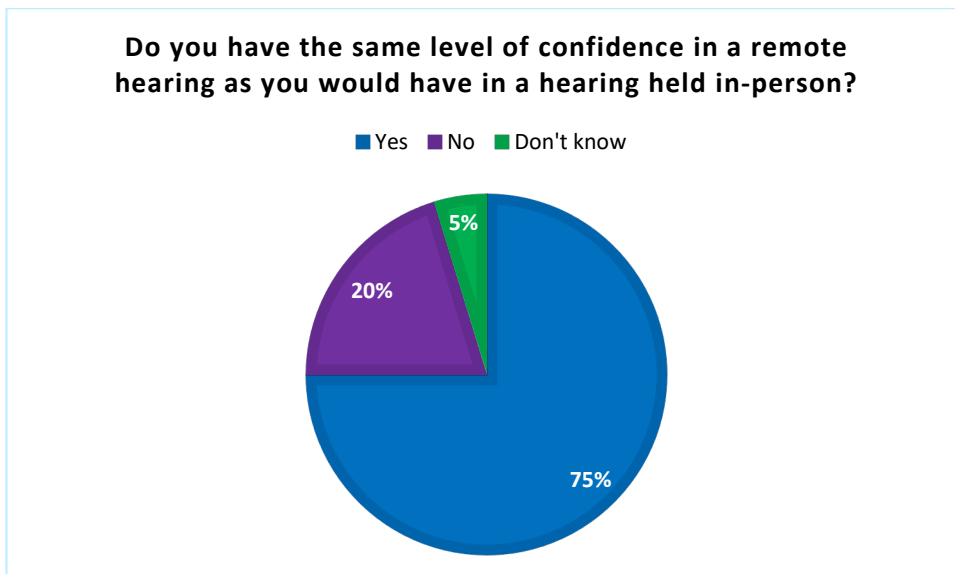
## 4. Views of online public panel on remote hearings and level of assurance

**Figure 1:** Views of public panel (N=148) on continuing remote hearings when it is practical to do so (Base: All respondents to online public poll)



The chart above shows the majority of online public panel respondents (91%) felt hearings should continue to be held remotely when it is fair and practical to do so. A small minority (6%) of respondents felt hearings should not continue to be held remotely and a few respondents (3%) did not know.

**Figure 2:** Views of public panel (N=148) on level of confidence in remote hearings (Base: All respondents to online public poll)



The pie chart shows the majority of online public panel respondents (75%) have the same level of confidence in a remote hearing as they do in a face-to-face hearing. Around a fifth of participants (20%) said they do not have the same level of confidence in remote hearings as they would in face-to-face hearings, and a small minority (5%) did not know.

## 5. Circumstances when not to hold remote hearings

**Table 2:** Views on when a hearing should not be held remotely (Base: All respondents)

Q2. Do you think there are any circumstances when a hearing should not be held remotely?	N and % individuals	N and % organisations	N and % Total
Yes	254 (55%)	16 (76%)	270 (56%)
No	84 (18%)	2 (10%)	86 (18%)
Don't know	122 (27%)	3 (14%)	125 (26%)
<b>Total N and % of responses</b>	<b>460 (100%)</b>	<b>21 (100%)</b>	<b>481 (100%)</b>

Respondents were asked if they think there are any circumstances when a hearing should not be held remotely. Table 2 shows around half of all respondents (56%) felt there were circumstances when a hearing should be held face-to-face, followed by those who were unsure (26%) and those who felt there were not (18%). When broken down further, table 2 shows that agreement amongst organisations (76%) was higher in comparison to individuals (55%). Only a small majority of organisations indicated they did not feel there were circumstances when a hearing should not be held remotely (10%).

Just over half of respondents left comments explaining their responses to these questions. An analysis of the themes found in their responses is presented below

### 5.1 Summary of themes

The most frequent reason given by respondents was the preference of a remote hearing or face-to-face hearing by the participants should always be considered. The level of seriousness along with the level of complexity of the case should also be taken into consideration when determining the format of the hearing. Some respondents felt disability and health is a factor which could impact the circumstances of remote hearings along with accessibility issues.

- At request of participants
- Level of seriousness
- Level of complexity
- Where disability/health prevents remote hearing
- Where access to requirements is not available
- Other comments

### 5.2 At request of participants

The most common theme identified in responses was that remote hearings should not take place if participants requested or would prefer a face-to-face hearing. Of these respondents, many cited that the choice of a remote hearing or a face-to-face hearing should be offered to all participants involved. Some respondents remarked registrants may request for the hearing to be held remotely if they have

issues that they feel might disadvantage them, for example poor information technology equipment or broadband connection. This theme was more prevalent amongst organisations.

### **5.3 Level of seriousness**

Many respondents cited the level of seriousness of a case should be considered. Many respondents felt a remote hearing would not be suitable for a case where there is the potential of a registrant being removed from the GPhC's register or the potential of criminal proceedings. Expanding on this point further, a few respondents felt that remote hearings would not be as suitable for more serious cases, as it could be difficult to pick up on the body language of the registrant and witnesses. This theme was more prevalent amongst individuals.

### **5.4 Level of complexity**

Many respondents felt the level of complexity of each individual case should be considered when determining whether a hearing should be held remotely or face-to-face. Of these respondents, many cited complex cases such as those with a large amount of evidence, cases with many witnesses or those involving multiple allegations should be held face-to-face as it may be more difficult to conduct these cases via a remote hearing.

### **5.5 Where disability/health prevents remote hearing**

A common theme to this question was that respondents felt disability may be a barrier to the registrant's ability and wish to attend the hearing remotely. Expanding on this point further, a few respondents felt that both mental and physical health could have an impact. Those with mental health issues may require the support offered in a face-to-face setting, and those with hearing or sight impairments may wish to attend a face-to-face hearing as there is increased opportunity for important communication signs to be missed or misinterpreted on video.

### **5.6 Where access to requirements is not available**

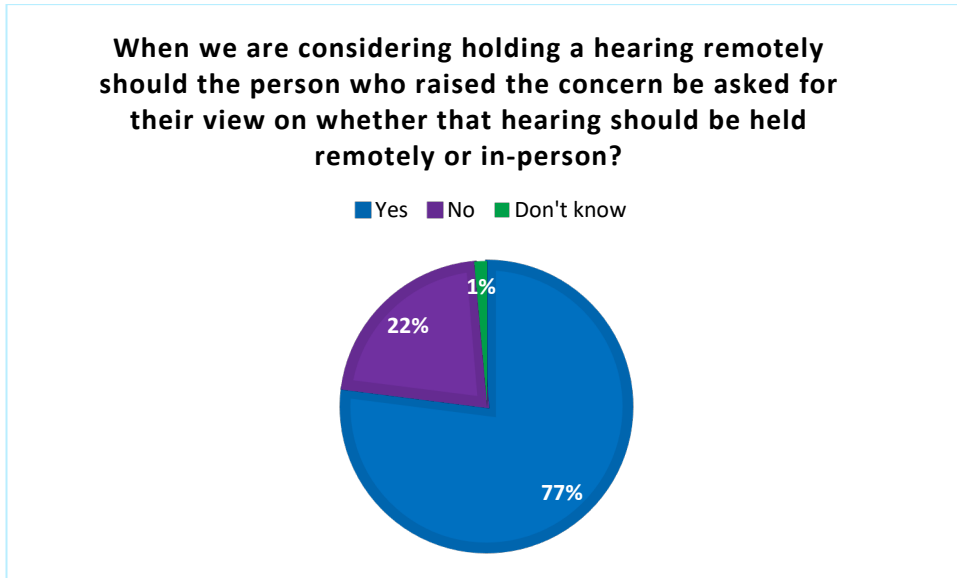
A concern raised by a few respondents was that not all registrants and witnesses have access to remote technology and for this reason a remote hearing could cause a disadvantage to those. A few respondents speculated that not all parties involved will have the adequate skills or equipment to partake in a remote hearing. This theme was more prevalent amongst organisations.

### **5.7 Other comments**

We heard from a small number of respondents who felt registrants should have a right to a face-to-face hearing if they would like one and this should be considered when establishing whether a hearing is held remotely or face-to-face. A small minority of respondents highlighted the loss of body language and non-verbal signs with remote hearings.

## 6. Views of online public panel on circumstances

**Figure 3:** Views of public panel (N=148) on considering views of person raising concern (Base: All respondents to online public poll)



The chart above shows the vast majority of online public panel respondents (77%) felt when considering holding a hearing remotely the person who raised the concern should be asked for their view on whether that hearing should be held remotely or face-to-face. Around a fifth of respondents (22%) felt this should not be the case and a very small minority (1%) did not know.

## 7. Impact on patients and the public and pharmacy professionals

**Figure 4:** Views of all respondents (N = 481) on whether our proposals positively or negatively impact on patients/the public and pharmacy professionals

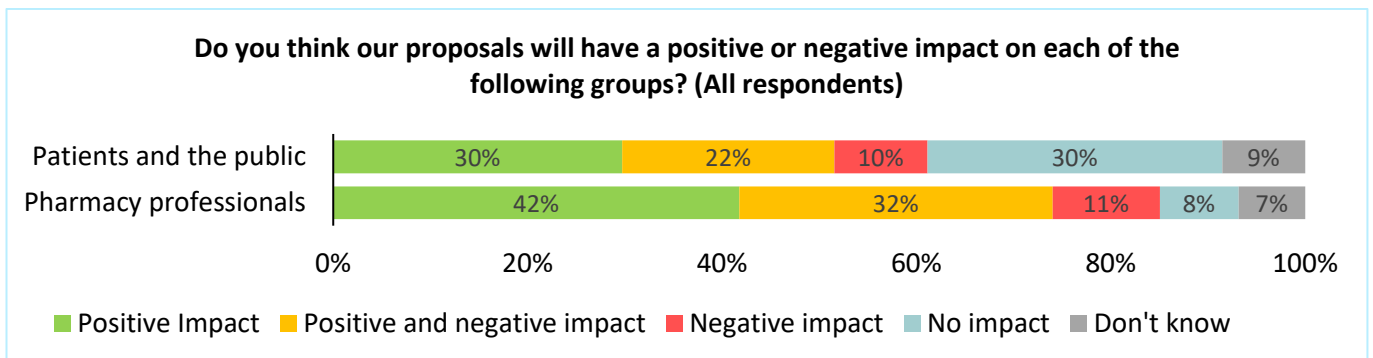


Figure 4 shows that a third of respondents (30%) felt the proposal would have a positive impact on patients and the public, and two-fifths (42%) said there would be a positive impact on pharmacy professionals. Almost a third of respondents (30%) felt the proposal would have no impact on patients and the public and around a tenth of respondents (8%) felt the proposal would have no impact on pharmacy professionals.

Many respondents also felt the proposals would have both a positive and negative impact on pharmacy professionals (32%) compared to around a quarter (22%) who felt the patients and public would be

affected both positively and negatively. Between 7% and 9% of respondents did not know what impact the proposals would have on any of the groups.

A full breakdown of individual and organisational responses to this question is available in [Appendix 7](#).

Just over half of respondents left comments explaining their responses to these questions. An analysis of the themes found in their responses is presented below.

## 7.1 Summary of themes

Many of the themes emerging for this question echoed those outlined under advantages and disadvantages. Respondents added how these advantages or disadvantages would either benefit the groups identified or could be detrimental to these groups.

The most frequent reason given by respondents was remote hearings can speed up the hearing process leading to cases being solved quicker. Those who provided more details for the impact of remote hearings felt remote hearings can be cost effective as well as easier and more flexible for participants to attend. Some respondents highlighted remote hearings can be less stressful and intimidating for participants. On the contrary, we heard that some respondents felt remote hearings can be perceived as less rigorous and provide less assurance than face/to face hearings.

- Increased efficiency of fitness to practise processes
- Reduced costs and time saved on travel
- Remote hearings may be less rigorous and provide less assurance to the public
- Remote hearings allow flexibility and are easier for participants
- Remote hearing process is less stressful for participants
- At request of participants
- Improved accessibility
- Other comments

## 7.2 Increased efficiency of fitness to practise processes

In responding to this question, many respondents felt remote hearings can lead to a more efficient process allowing cases to be solved quicker. We heard it can be easier to schedule remote hearings due to participants having more availability to attend remotely which can be more convenient. Those who shared this view felt this would impact registrants positively as well as the public and patients who receive an outcome to the case quicker.

## 7.3 Reduced costs and time saved on travel

Many respondents felt remote hearings are a cost and time effective method, with savings being made on time spent travelling to and from the hearing in London as well as the actual cost of the travel and other arrangements required. This theme was more prevalent amongst individuals.

## 7.4 Remote hearings may be less rigorous and provides less assurance to the public

This theme was more prevalent amongst individuals. In responding to this question, many respondents felt remote hearings may lead to patients and the public perceiving the fitness to practise process as more trivial as it may be viewed as a more informal process compared to that of face-to-face hearings.

Those who shared this view felt it could lead to a lack of patient and public trust in an open and transparent process.

A few of these respondents discussed that registrants may be less intimidated of the fitness to practise process if the hearing is held remotely and that it could lead to the public and patients being less likely to raise a concern to the regulator.

### **7.5 Remote hearings allow flexibility and are easier for participants**

Many respondents felt remote hearings have a positive impact on participants in terms of being more flexible and easier to participate in. Most of the respondents who felt this way discussed the fact remote hearings may be easier to arrange due to there being no requirement to travel into London and there being more ease of access to registrants and the public remotely.

One organisation felt patients and the public generally do not like attending hearings face-to-face, therefore the option of a remote hearing is positive and welcomed. Most of the organisations felt remote hearings allow registrants more scope to attend the hearing as it is not as much of a challenge to arrange the relevant work cover as face-to-face hearings where travel arrangements and travel time need to be considered. This theme was more prevalent amongst organisations.

### **7.6 Remote hearing process is less stressful for participants**

In commenting on this question, many respondents felt remote hearings can be less intimidating and stressful for participants, in particular witnesses who may be more willing to provide evidence remotely than at a face-to-face hearing which may be more daunting for them. This theme was more prevalent amongst organisations. A small number of these respondents discussed the swifter the process of a remote hearing, the more reduction of stress for participants involved.

A small number of respondents felt this issue varied on a case-by-case basis as not all participants will find face-to-face hearings stressful or intimidating and may prefer them.

### **7.7 At request of participants**

When considering the impact, many respondents felt individuals should be given the option to attend the hearing in a remote or face-to-face setting, as it is very much down to individual circumstances and preferences of the parties involved. One organisation commented that giving individuals the choice would benefit them and it should not be for the panel to decide how the hearing is held but agreement should be reached based on all participants' preference.

### **7.8 Improved accessibility**

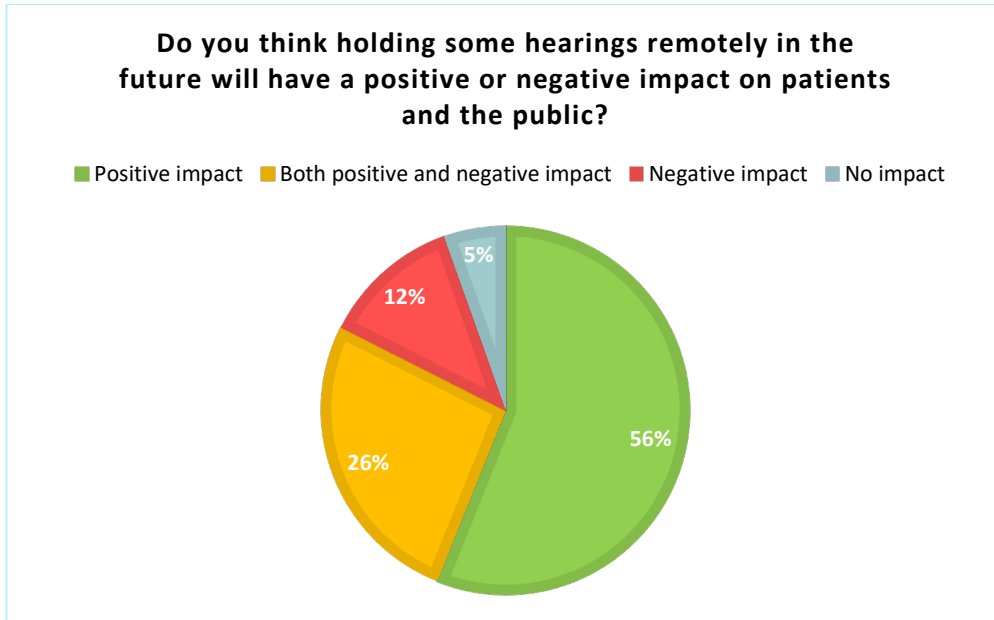
Some respondents said remote hearings allow increased accessibility for disabled registrants who would welcome this option due to the option to attend from their own home and not be required to travel into London which could be problematic.

### **7.9 Other comments**

We heard from some respondents who felt remote hearings would have no impact either way on pharmacy professionals or patients and the public. We heard from a small number of respondents who felt registrants should have a right to a face-to-face hearing if they would like one and this should be considered when establishing whether a hearing is held remotely or face-to-face. A small minority of respondents highlighted the loss of body language and non-verbal signs with remote hearings.

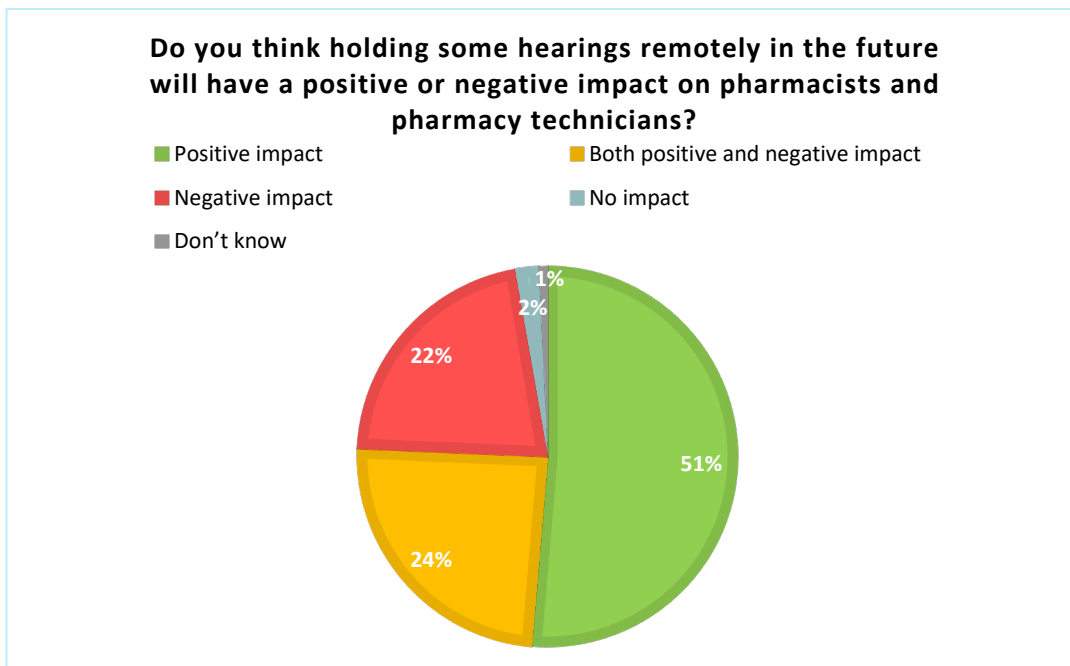
## 8. Views of online public panel on impact

**Figure 5:** Views of public panel (N=148) on impact of remote hearings on patients and the public (Base: All respondents to online public poll)



The pie chart above highlights over half of online public panel respondents (56%) felt holding some remote hearings remotely in the future would have a positive impact on patients and the public, while around a quarter of respondents (26%) said this would have both a positive and negative impact on patients and the public. Around a tenth (12%) of respondents felt holding some remote hearings remotely in the future would have a negative impact, and a small minority (5%) felt it would have no impact.

**Figure 6:** Views of public panel on impact on pharmacists and pharmacy technicians (Base: All respondents to online public poll)



The chart above highlights over half of online public panel respondents (51%) felt holding some hearings remotely in the future would have a positive impact on pharmacists and pharmacy technicians. Almost a quarter of respondents (24%) felt this would have both a positive and negative impact. Just over a fifth of respondents (22%) felt holding some remote hearings in the future would have a negative impact on pharmacists and pharmacy technicians. A small minority (2%) felt there would be no impact and less than 1% did not know.

## 9. Impact on people sharing protected characteristics

**Figure 7:** Views of all respondents (N = 478)<sup>1</sup> on whether our proposals positively or negatively impact any individuals or groups sharing any of the protected characteristics in the Equality Act 2010

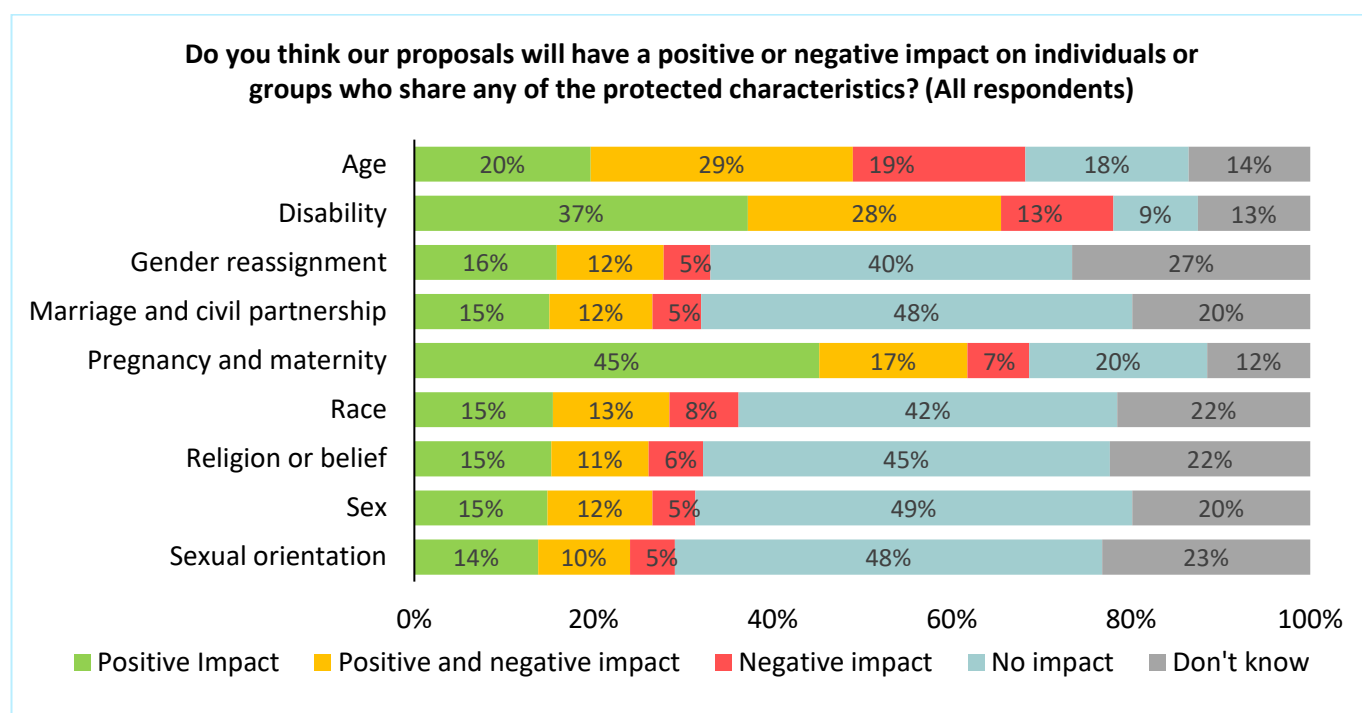


Figure 7 shows that, a majority of respondents (40-49%) felt the proposal would have no impact on people sharing any of the protected characteristics, with the exception of disability, age and pregnancy and maternity. A small minority of respondents (14-20%) identified a positive impact of the proposals on each of the protected characteristics, with the exception of disability (37%) and pregnancy and maternity (45%) which saw a larger number of respondents deeming these as having a positive impact.

Figure 7 also shows around a quarter of respondents (20-27%) did not know if the proposal would impact on people sharing any of the protected characteristics with the exception of age, disability and pregnancy maternity which had lower rates.

A full breakdown of individual and organisational responses to this question is available in [Appendix 8](#).

Two fifths of respondents left explanatory comments. The following is an analysis of the themes found in these comments.

<sup>1</sup> Three organisations submitting their response by email did not identify the impact on each of the protected characteristics so their feedback has been captured in the qualitative analysis only



## 9.1 Summary of themes

The most frequent reason given by respondents was remote hearings can offer improved accessibility for those with protected characteristics. Those who provided more details for the impact of remote hearings on people sharing protected characteristics felt remote hearings could benefit older people, disabled people along with those who are pregnant or on maternity leave. However, we heard from respondents that remote hearings could potentially have a negative impact on those who have poor technical skills and those who may experience accessibility issues.

- Improved accessibility
- Positive impact on people with disabilities
- Participants may lack the technical skills
- Negative impact on age/older people
- Positive impact on pregnant women and those on maternity leave
- Negative impact on people with disabilities
- Positive impact on age/older people
- Impact on other protected characteristics
- Reduced accessibility
- At request of participants
- Remote hearings will provide less support for witnesses
- Requirement for further guidance
- Other comments

## 9.2 Improved accessibility

In commenting on this theme, many respondents, including a higher proportion of individuals than organisations, felt remote hearings could improve accessibility for those with disabilities, or those who would find travelling to a face-to-face hearing more challenging. A few of these respondents highlighted remote hearings would be beneficial for those with family commitments such as childcare. We heard older people may benefit from remote hearings due to not being required to travel into London, however they may also be disadvantaged if they do not have the technical ability and skills to attend a remote hearing (see section 9.4).

## 9.3 Positive impact on people with disabilities

One of the most frequently cited issues was remote hearings can benefit disabled participants as remote hearings could work more effectively for this group. Many of these respondents referenced the fact that participants would not be required to travel into London as being particularly beneficial to disabled people. Broken down further, those who felt remote hearings could have both a positive and negative impact emphasised that it is dependent on the individual's type of disability. Those who shared this view suggested those with disabilities that affect their mobility may prefer remote hearings whereas those with visual or hearing impairments may benefit from a face-to-face hearing.

## 9.4 Participants may lack technical skills

Many respondents felt that participants with poor technical skills could be negatively impacted by the move to remote hearings. Respondents particularly highlighted older people as falling into this category. The older participants may not have as much experience with remote technology and therefore may find the process daunting and stressful due to the lack of familiarity. Some respondents felt participants with certain disabilities may require assistance in setting up the technology for the remote hearing and throughout the hearing process.

## 9.5 Positive impact on pregnant women and those on maternity leave

A common issue raised by respondents was in relation to remote hearings benefiting those pregnant or on maternity leave. Those who shared this view highlighted not being required to travel to the hearing would be beneficial and could allow for childcare to be arranged more easily for those with this commitment. A few respondents highlighted the benefits of remote hearings for those suffering with morning sickness or any other pregnancy related symptoms who would struggle to travel to London and therefore impact attendance at the hearing.

## 9.6 Positive impact on age/older people

Many respondents felt remote hearings could have a positive impact on older people by removing the requirement to travel into London. However, some respondents highlighted that older people may be disadvantaged by not having the required technical skills or equipment to take part in a remote hearing which could cause distress and anxiety (see section 9.4 above).

## 9.7 Impact on other protected characteristics

A handful of respondents, including a higher proportion of organisations than individuals, highlighted the impact of the proposals on those who shared other protected characteristics. For example, those for whom English is not their first language may struggle more with communication on remote hearings and may benefit from face-to-face hearings. We heard that some ethnic minority groups cohabit in extended families, which may mean remote hearings are not appropriate due to the lack of privacy and a quiet setting.

## 9.8 Reduced accessibility

A small number of respondents, mostly organisations, highlighted remote hearings are not always accessible for all participants and therefore this should be reviewed on a case-by-case basis taking into consideration the circumstances of each individual.

One organisation felt it would be essential that the GPhC completes an assessment of need to ensure that neither the registrant at the centre of the concern or any other stakeholders are disadvantaged by a remote hearing.

We heard from an organisation who highlighted they had been in contact with registrants who have Autism who have reported finding it difficult and overwhelming to cope with many faces on a screen, which would impact the effectiveness of the hearing if it were to be held remotely, as it may disadvantage them. We also heard from one organisation who reported registrants who are dyslexic are more likely to struggle with reading large evidence bundles whilst on screen.

## **9.9 At request of participants**

Some respondents stated that the preference of the participants of the hearing should be considered when establishing whether a hearing will be held remotely or face-to-face and specific consideration should be given to those who feel they would be disadvantaged by a remote hearing. This theme was more prevalent amongst organisations.

## **9.10 Remote hearings will provide less support for witnesses**

Some respondents felt witnesses sharing certain protected characteristics would be negatively impacted as remote hearings may mean less support for witnesses. This could be particularly problematic for those who do not have support at home. Expanding on this further, a small number of organisations talked about how remote hearings may mean less technological support for witnesses who may need assistance with a remote hearing if they are not familiar with the process to ensure they are not disadvantaged in any way. This theme was more prevalent amongst organisations.

## **9.11 Requirement for further guidance**

A small number of organisations felt that clear guidance would be key to ensure groups are shielded from negative impacts of remote hearings and an assessment of needs should be provided with provisions made to meet the stated need of the participants on a case-by-case basis.

## **9.12 Other comments**

We heard from a small minority of respondents who felt remote hearings may impede effective communication in general for those with protected characteristics. Similarly, a small minority felt the benefits of attending a remote hearing at home or in a familial environment may impact those with protected characteristics.

# Appendix 1: Summary of our proposals

We propose to amend our legislative rules to permit greater flexibility in how we hold meetings and hearings. During the Covid-19 pandemic lockdown and restrictions, many meetings and hearings had to be held remotely. This proved to be successful in many ways, for example, increased engagement and attendance from registrants. It therefore persuaded us to seek a permanent rule change to enable flexibility in how a meeting or hearing is held. For some cases, a meeting or hearing would be suitable to be held remotely and in other cases it would be suitable for a meeting or hearing to be held in-person. The Chair of each meeting or hearing will make the decision whether the meeting or hearing should be held remotely or in-person.

The suitability of each case for how a meeting or hearing is held will depend on many factors. The public consultation was undertaken to better understand the views of the public and the profession on what factors are important when making that decision. We propose to publish guidance on what factors are taken into consideration when making a decision on whether a meeting or hearing should be held remotely or in-person.

# Appendix 2: About the consultation

## Overview

The consultation was open for 12 weeks, beginning on 16 November 2021 and ending on 8 February 2022. To make sure we heard from as many individuals and organisations as possible:

- an online survey was available for individuals and organisations to complete during the consultation period. We also accepted postal and email responses
- we created a toolkit of materials for organisations to disseminate information about the consultation to their members, including pre-written newsletter and social media content and presentation slides
- we promoted the consultation through direct emails to stakeholders, press release to the pharmacy trade media and via our social media
- we carried out an online survey with our online public panel members<sup>2</sup>. The survey was open from 11 January to 8 February 2022.

## Survey

We received a total of **483** written responses to our consultation. **460** of these respondents identified themselves as individuals and **23** responded on behalf of an organisation.

Of these responses, **481** had responded to the consultation survey (**460** individuals and **21** organisations). The vast majority of these respondents completed the online version of the survey, with the remaining respondents submitting their response by email, using the structure of the consultation questionnaire.

Alongside these, we received **two** responses from organisations writing more generally about their views.

## Online public panel survey

We received a total **148** responses to the survey of our online public panel. The survey was designed as quick poll with five questions each with a yes/no or rating scale response option.

## Social media

We monitored social media activity during the consultation period and collated the feedback for inclusion in our consultation analysis.

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<sup>2</sup> Our online public panel helps us find out what people think about pharmacy services and our work. There are currently 200 people on our online public panel from across England, Scotland, and Wales. Panel members take part in online focus groups and surveys and their feedback helps us to shape our work.

# Appendix 3: Our approach to analysis and reporting

## Overview

Every response received during the consultation period and social media activity has been considered in the development of our analysis. Our thematic approach allows us to represent fairly the wide range of views put forward, whether they have been presented by individuals or organisations, and whether we have received them in writing.

The key element of this consultation was a self-selection survey, which was hosted on the Smart Survey online platform. As with any consultation, we expect that individuals and groups who view themselves as being particularly affected by the proposals, or who have strong views on the subject matter, are more likely to have responded.

The purpose of the analysis was to identify common themes amongst those involved in the consultation activities rather than to analyse the differences between specific groups or sub-groups of respondents.

The term ‘respondents’ used throughout the analysis refers to those who completed the consultation survey. It includes both individuals and organisations.

Full details of the profile of respondents to the online survey is given in [Appendix 4](#).

For transparency, [Appendix 5](#) provides a list of the organisations that have engaged in the consultation through the online survey and email responses.

The consultation questions are provided in [Appendix 6](#).

## Quantitative analysis

The survey contained quantitative questions such as yes/no questions and rating scales. All responses have been collated and analysed including those submitted by email or post using the consultation document. Those responding by post or email more generally about their views are captured under the qualitative analysis only.

Responses have been stratified by type of respondent, so as not to give equal weight to individual respondents and organisational ones (potentially representing hundreds of individuals). These have been presented alongside each other in the tables throughout this report, to help identify whether there were any substantial differences between these categories of respondents.

A small number (less than 4) of multiple responses were received from the same individuals. These were identified by matching on email address and name. In these cases, the individual respondent’s most recent response was included in the quantitative analysis, and all qualitative responses were analysed.

The tables contained within this analysis report present the number of respondents selecting different answers in response to questions in the survey. The ordering of relevant questions in the survey has been followed in the analysis.

Percentages are shown without decimal places and have been rounded to the nearest whole number. As a result, some totals do not add up to 100%.

All questions were mandatory, and respondents had the option of selecting 'don't know'. Routing was used where appropriate to enable respondents to skip questions that weren't relevant. Skipped responses are not included in the tables for those questions.

Cells with no data are marked with a dash.

## Qualitative analysis

This analysis report includes a qualitative analysis of all responses to the consultation, including online survey responses from individuals and organisations, email and postal responses and social media activity.

The qualitative nature of the responses here meant that we were presented with a variety of views, and rationales for those views. Responses were carefully considered throughout the analysis process.

A coding framework was developed to identify different issues and topics in responses, to identify patterns as well as the prevalence of ideas, and to help structure our analysis. The framework was built bottom up through an iterative process of identifying what emerged from the data, rather than projecting a framework set prior to the analysis on the data.

Prevalence of views was identified through detailed coding of written responses and analysis of feedback from stakeholder events using the themes from the coding framework. The frequency with which views were expressed by respondents is indicated in this report with themes within each section presented in order of prevalence. The use of terms also indicates the frequency of views, for example 'many'/'a large number' represent the views with the most support amongst respondents. 'Some'/'several' indicate views shared by a smaller number of respondents and 'few'/'a small number' indicate issues raised by only a limited number of respondents. Terms such as 'the majority'/'most' are used if more than half of respondents held the same views. NB. This list of terms is not exhaustive and other similar terms are used in the narrative.

## The consultation survey structure

The consultation survey was structured in such a way that open-ended questions followed each closed question or series of closed questions on the consultation proposals. This allowed people to explain their reasoning, provide examples and add further comments.

For ease of reference, we have structured the analysis section of this report in such a way that it reflects the order of the consultation proposals. This has allowed us to present our quantitative and qualitative analysis of the consultation questions alongside each other, whereby the thematic analysis substantiates and gives meaning to the numeric results contained in the tables.

# Appendix 4: Respondent profile: who we heard from

A series of introductory questions sought information on individuals' general location, and in what capacity they were responding to the survey. For pharmacy professionals, further questions were asked to identify whether they were pharmacists, pharmacy technicians or pharmacy owners, and in what setting they usually worked. For organisational respondents, there were questions about the type of organisation that they worked for. The tables below present the breakdown of their responses.

## Category of respondents

**Table 3:** Responding as an individual or on behalf of an organisation (Base: all respondents)

Are you responding:	Total N	Total %
As an individual	460	96%
On behalf of an organisation	21	4%
<b>Total N and % of responses</b>	<b>481</b>	<b>100%</b>

## Profile of individual respondents

**Table 4:** Countries (Base: all individuals)

Where do you live?	Total N	Total %
England	391	85%
Scotland	41	9%
Wales	20	4%
Other	8	2%
<b>Total N and % of responses</b>	<b>460</b>	<b>100%</b>

**Table 5:** Respondent type (Base: all individuals)

Are you responding as:	Total N	Total %
A pharmacist	340	74%
A pharmacy technician	102	22%
A member of the public	8	2%
Other	10	2%
<b>Total N and % of responses</b>	<b>460</b>	<b>100%</b>



**Table 6:** Main area of work (Base: individuals excluding members of the public)

Please choose the option below which best describes the area you mainly work in:	Total N	Total %
Community pharmacy	195	43%
Hospital pharmacy	109	24%
Prison pharmacy	3	1%
Primary care organisation	24	5%
GP practice	29	6%
Care home	2	0%
Pharmaceutical industry	8	2%
Research, education or training	31	7%
Other	51	11%
<b>Total N and % of responses</b>	<b>452</b>	<b>100%</b>

**Table 7:** Size of community pharmacy (Base: individuals working in community pharmacy)

Which of the following best describes the community pharmacy you work in (or own):	Total N	Total %
Independent pharmacy (1 pharmacy)	32	16%
Independent pharmacy chain (2-5 pharmacies)	28	14%
Small multiple pharmacy chain (6-25 pharmacies)	14	7%
Medium multiple pharmacy chain (26-100 pharmacies)	15	8%
Large multiple pharmacy chain (Over 100 pharmacies)	104	53%
Online-only pharmacy	2	1
<b>Total N and % of responses</b>	<b>195</b>	<b>100%</b>

**Table 8:** Respondent type (Base: individual pharmacists and pharmacy technicians)

Have you been involved in our fitness to practise process?	Total N	Total %
Yes	70	15%
No	360	78%
Don't know	18	4%
Prefer not to say	12	3%
<b>Total N and % of responses</b>	<b>460</b>	<b>100%</b>

## Profile of organisational respondents

**Table 9:** Type of organisation (Base: all organisations)

Please choose the option below which best describes your organisation	Total N	Total %
Registered pharmacy	7	33%
Organisation representing pharmacy professionals or the pharmacy sector	6	29%
Organisation representing patients or the public	2	10%
NHS organisation or group	1	5%
Regulatory body	1	5%
Other	4	19%
<b>Total N and % of responses</b>	<b>21</b>	<b>100%</b>

**Table 10:** Type of organisation (Base: registered pharmacy organisations)

Which of the following best describes the community pharmacy you work in (or own):	Total N	Total %
Independent pharmacy (1 pharmacy)	3	43%
Independent pharmacy chain (2-5 pharmacies)	1	14%
Medium multiple pharmacy chain (26-100 pharmacies)	1	14%
Large multiple pharmacy chain (over 100 pharmacies)	2	29%
<b>Total N and % of responses</b>	<b>7</b>	<b>100%</b>

## Monitoring questions

Data was also collected on respondents' protected characteristics, as defined within the Equality Act 2010. The GPhC's equalities monitoring form was used to collect this information, using categories that are aligned with the census, or other good practice (for example on the monitoring of sexual orientation). The monitoring questions were not linked to the consultation questions and were asked to help understand the profile of respondents to the consultation, to provide assurance that a broad cross-section of the population had been included in the consultation exercise. A separate equality impact assessment has been carried out and will be published alongside this analysis report.

# Appendix 5: Organisations

The following organisations responded to our consultation on remote hearings:

ASDA Pharmacy

BLM

Broughton Park Pharmacy Ltd

Community Health Voice

Community Pharmacy Wales

Company Chemists' Association

Guild of Healthcare Pharmacists

Heald Green Pharmacy

Healthcare Improvement Scotland

Healthwatch Cambridgeshire and Peterborough

Heatherlands

Humankind

Lindsay Gilmour Pharmacy

Moseleycare Limited

National Pharmacy Association

Nursing and Midwifery Council

Pharmacist Support

Pharmacy Law & Ethics Association

Professional Standards Authority

Rowlands Pharmacy

Royal Pharmaceutical Society

Temple Bright LLP

The Pharmacists' Defence Association

# Appendix 6: Consultation questions

## Continuing remote hearings

**Q1:** Do you agree or disagree that hearings should continue to be held remotely when it is fair and practical to do so?

## Advantages of remote hearings

**Q2:** What do you think the advantages would be (if any) of remote hearings?

## Disadvantages of remote hearings

**Q3:** What do you think the disadvantages would be (if any) of remote hearings?

## Circumstances of remote hearings

**Q4:** Do you think there are any circumstances when a hearing should not be held remotely?

**Q5:** If 'yes', please describe the circumstances

## Equality and impact questions

We want to know if our proposals will have a positive or negative impact on patients and the public and on the pharmacy professionals we regulate.

**Q6:** Do you think our proposals will have a positive or negative impact on each of these groups?

- Patients and the public
- Pharmacy professionals

**Q7:** Please give comments explaining your answer. Please describe the individuals or groups concerned and the impact you think our proposals would have.

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

- Age
- Disability
- Gender reassignment
- Marriage and civil partnership
- Pregnancy and maternity
- Race
- Religion or belief
- Sex
- Sexual orientation

**Q8:** Do you think our proposals will have a positive or negative impact on individuals or groups who share any of the protected characteristics?

**Q9:** Please give comments explaining your answer. Please describe the individuals or groups concerned and the impact you think our proposals would have.

# Appendix 7: The impact of the proposed changes on patients/the public and pharmacy professionals

## Individual responses

**Figure 8:** Views of individual respondents (N = 460) on whether our proposals positively or negatively impact patients/the public and pharmacy professionals

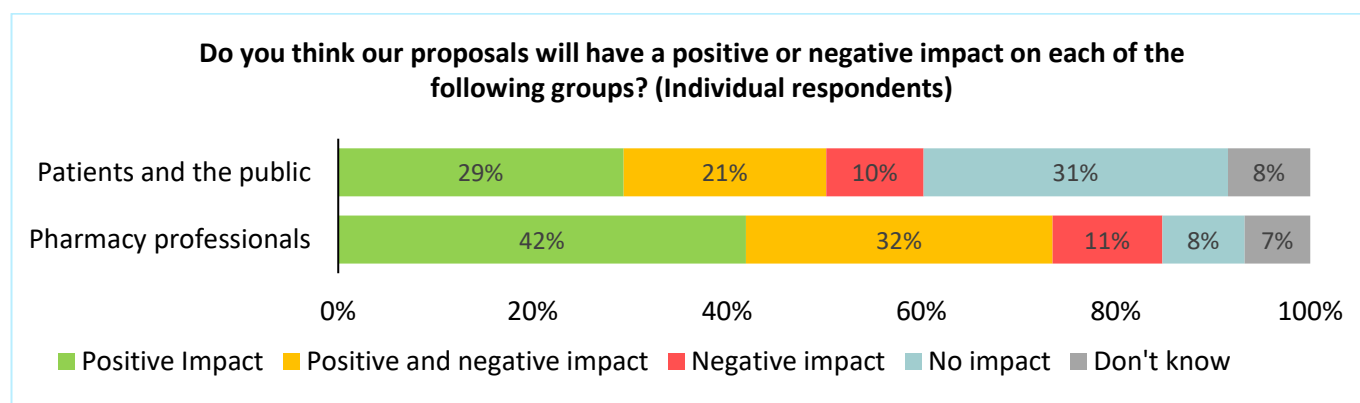


Figure 8 shows that almost half of individuals (42%) felt that our proposals would have a positive impact on pharmacy professionals. Many respondents (32%) stated they felt it would have both a positive and negative impact on this group. Roughly the same proportion of individuals felt that they did not know the impact on this group (7%) as well as having no impact (8%).

Nearly a third of individuals (29%) felt that patients and the public would be positively impacted or that the impact would be both positive and negative (21%). More individuals felt there would be no impact (31%) on patients and the public if our proposals would have an impact on this group.

NB. Please see section 7 in the main body of the report for the chart showing the overall responses and further analysis.

## Organisational responses

**Figure 9:** Views of organisations (N = 21) on whether our proposals positively or negatively impact patients/the public and pharmacy professionals

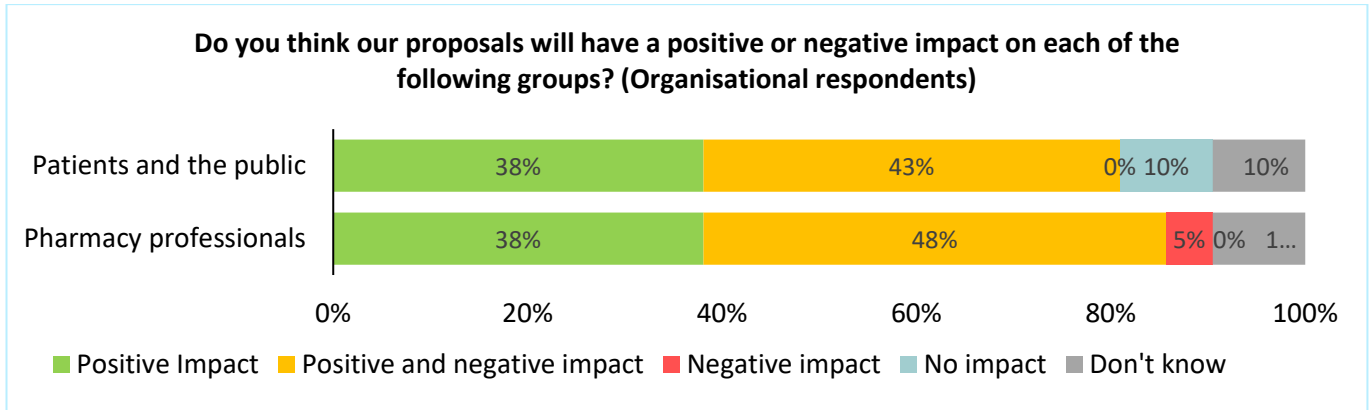


Figure 9 shows that nearly half of organisations (48%) felt the proposals would have both a positive and negative impact on pharmacy professionals. Almost two-fifths (38%) of organisations felt the proposals would have a positive impact on pharmacy professionals.

Many organisations also felt the proposals would have both a positive and negative impact on patients and the public (43%). Almost two-fifths (38%) of organisations felt the proposals would have a positive impact on patients and the public. Between 0% and 10% of organisations did not know what impact the proposals would have on any of the groups or felt there would be no impact.

NB. Please see section 7 in the main body of the report for the chart showing the overall responses and further analysis.

# Appendix 8: The impact of the proposed changes on people sharing particular protected characteristics

## Individual responses

**Figure 10:** Views of individual respondents (N = 460) on whether our proposals positively or negatively impact any individuals or groups sharing any of the protected characteristics in the Equality Act 2010

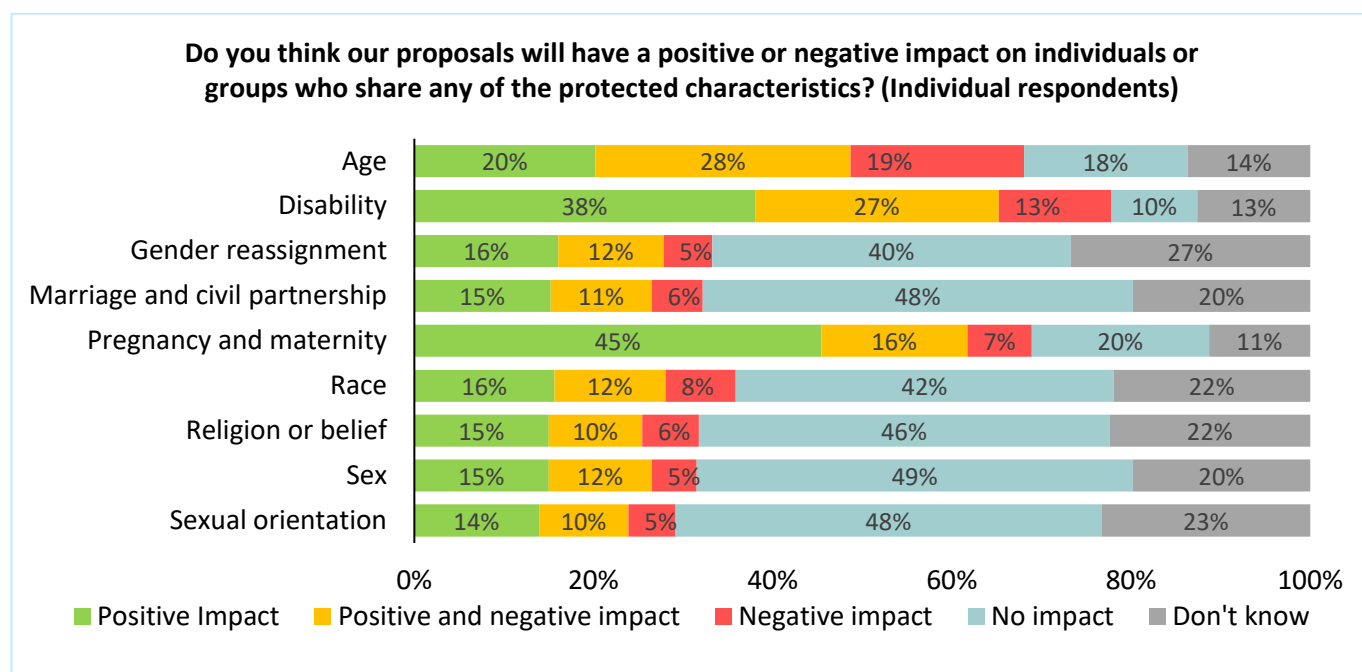


Figure 10 shows that approximately almost half of respondents (45%) of individuals felt the proposals would have a positive impact on pregnancy and maternity and disability (38%). Most individuals felt that the proposals would not have an impact on any of the people sharing protected characteristics, with the exception of age and disability. Around a quarter (19%) of individuals viewed our proposals as having a negative impact on age (19%) as a protected characteristic, followed by disability (13%).

NB. Please see section 9 in the main body of the report for the chart showing the overall responses and further analysis.

## Organisational responses

**Figure 11:** Views of organisations (N = 18)<sup>3</sup> on whether our proposals positively or negatively impact any individuals or groups sharing any of the protected characteristics in the Equality Act 2010

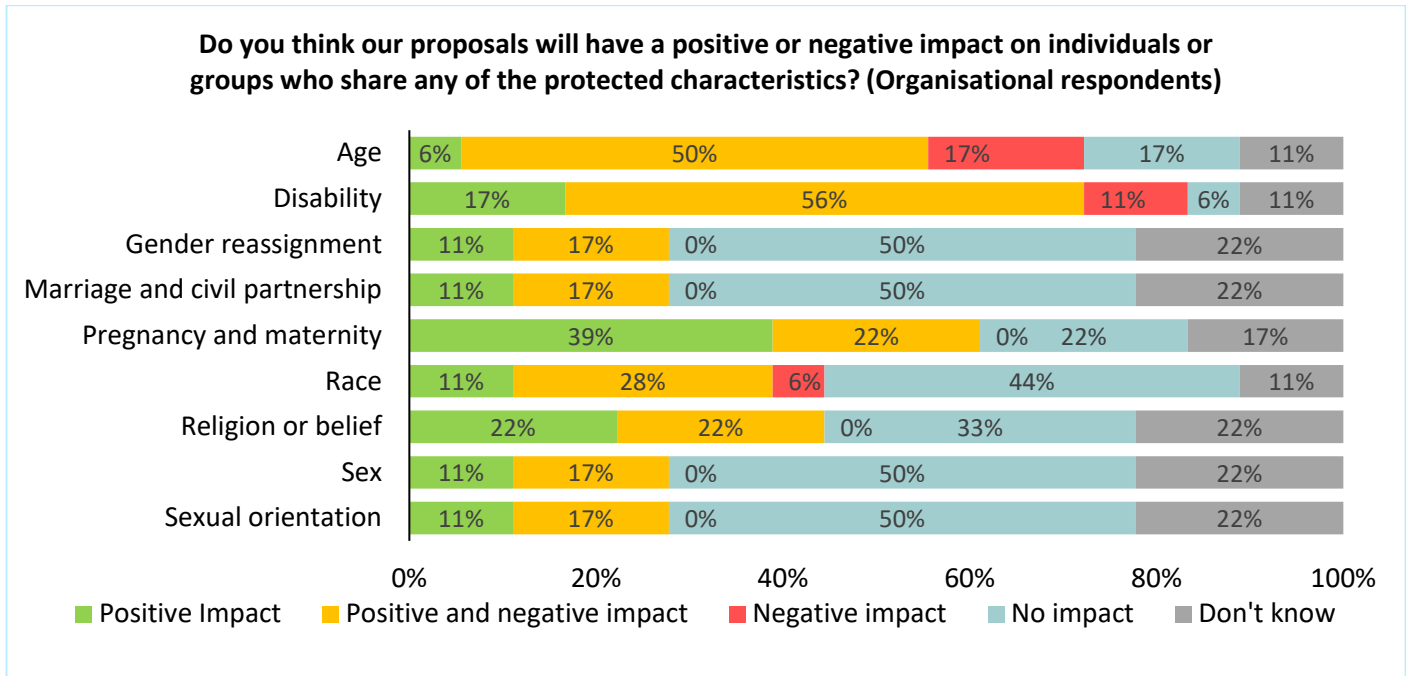


Figure 11 shows that most organisations felt that the proposals would either have no impact or did not know what impact it would have on people sharing protected characteristics, with the exception of age, disability and pregnancy/maternity. Over a third of organisations felt the proposals would positively impact pregnancy and those on maternity leave (39%) compared to (45%) of individuals. Around half of organisations (50%) felt that the proposals would have a positive and negative impact on the protected characteristics of age and 56% said there would be a positive and negative impact on disability.

NB. Please see section 9 in the main body of the report for the chart showing the overall responses and further analysis.

<sup>3</sup> Three organisations submitting their response by email did not identify the impact on each of the protected characteristics so their feedback has been captured in the qualitative analysis only





