

GPhC Registrant Survey 2013

The General Pharmaceutical Council (GPhC) is the independent regulator for pharmacists, pharmacy technicians and pharmacy premises in Great Britain. We are conducting this survey to improve our understanding of registered professionals' pharmacy practice, training and development, as well as work and employment. The results from this survey will be used to inform our future work.

Thank you for taking part in this survey - your participation is very important to us.

S/n	1001-1007
Card	1009-1010
Version	1011 VERSION NUMBER 1
Batch No.	1012-1016
Spare	1017-1049

Section A: Work in Great Britain in the last 12 months

Q1

In the last 12 months in which of the following types of settings have you worked in a pharmacy related role? Tick all that apply

1050-1067

I have not worked in a pharmacy related role in the last 12 months ☐ 01

Large multiple community pharmacy (Asda, Boots, Co-operative, Day Lewis, Lloyds, Morrisons, Rowlands, Sainsbury's, Superdrug, Tesco) ☐ 02

Another multiple community pharmacy not listed above, with 5 or more stores ☐ 03

Community pharmacy with 4 or fewer stores ☐ 04

Hospital pharmacy (NHS or private hospital) ☐ 05

Primary care (other than community pharmacy) ☐ 06

University, education or training provider ☐ 07

Pharmaceutical industry ☐ 08

Other (write in) 09

SPARE 1068-1089

Section B: Working status

Q2

What is your current working status? Tick all that apply

1090-1095

Working in a paid pharmacy role (full-time or part-time) in Great Britain ☐ 01

Working in a paid non-pharmacy role (full-time or part-time) in Great Britain ☐ 02

Temporarily away from work (e.g. maternity or paternity leave/ sick leave/ other approved leave) ☐ 03

In full-time education and intending to return to pharmacy practice in Great Britain ☐ 04

Unemployed but looking for paid pharmacy work (either full-time or part-time) in Great Britain ☐ 05

Other (write in) 06

Q3

How many paid pharmacy related jobs (full-time or part-time) do you currently work in?

Only include jobs held in Great Britain

1120

0 0 1 1 2 2 3 3 4 4 5 or more 5



Q7 (on page 10)

Section C: Current employment in pharmacy

Please let us know details of the paid pharmacy positions you currently hold. Only include jobs held in Great Britain. We have included space for you to tell us about up to three different jobs.

If you have more than one job, please start with the one you consider to be your main job.

If you are not currently working in a pharmacy role in Great Britain please go to Q7 on page 10.

Job 1

Q4A

What is your job title? 1121-1170

SPARE 1171-1175

Q4B

How many hours do you typically work in this job? 1176-1179

per week

Q4C

What type of setting do you practise in, in this job? 1180-1181

Large multiple community pharmacy (Asda, Boots, Co-operative, Day Lewis, Lloyds, Morrisons, Rowlands, Sainsbury's, Superdrug, Tesco) ☐ 01

Another multiple community pharmacy not listed above, with 5 or more stores ☐ 02

Community pharmacy with 4 or fewer stores ☐ 03

Hospital pharmacy (NHS or private hospital) ☐ 04

Primary care (other than community pharmacy) ☐ 05

University, education or training provider ☐ 06

Pharmaceutical industry ☐ 07

Other (write in) 08

SPARE 1182-1199

Q4D What is your employment status in this job? 1200

Business owner (including pharmacy owner) ☐ 1

Locum/ self-employed/ freelancer/ contractor ☐ 2

Employee ☐ 3

Q4E What is the postcode of your workplace? Enter postcode or tick box as appropriate. If you mainly work from home please enter your home postcode. We only need the first part of the postcode, e.g. S014.

Write in 1202-1205 or No fixed place ☐ 1201 1

Q4F Is this a patient facing role? By patient facing we mean roles delivering care and services directly to individual patients or members of the public. 1206

Yes, all or most of the time ☐ 1

Yes, some of the time ☐ 2

Yes, occasionally ☐ 3

No, rarely or never ☐ 4

Q4G What responsibilities do you have in this job?

1207-1228
Please tick **all**
responsibilities that apply

1229-1250
Please tick your **three**
main responsibilities

Providing advice and information to patients and carers
(for example: on medicine use, health promotion) ☐ 01

☐ 01

Providing advice and information to health professionals ☐ 02

☐ 02

Supplying medicines and medical devices
(for example: supervising sales, selling, dispensing, accuracy checking) ☐ 03

☐ 03

Any other clinical work
(for example: health checks, vaccinations, ward rounds) ☐ 04

☐ 04

Preparation and manufacturing of medicinal products
(for example: extemporaneous/ aseptic preparation, accuracy checking) ☐ 05

☐ 05

Quality assurance of medicinal products and/ or their distribution
(for example: batch checking, pharmacovigilance) ☐ 06

☐ 06

Management of staff ☐ 07

☐ 07

Routine tasks to manage the pharmacy environment
(for example: disposal of medicines, ordering, receiving & checking stock) ☐ 08

☐ 08

Education, training, tutoring and research ☐ 09

☐ 09

Governance, policy, regulation and other administrative work ☐ 10

☐ 10

Development and management of pharmacy IT systems and technology ☐ 11

☐ 11

Q4H

In the last 12 months have you had a formal appraisal of your work in this job? By this we mean formal feedback on your performance in this role. 1251

Yes

☐ 1

No

☐ 2

➔ Q4L

Q4I

Was the formal appraisal carried out by a peer in the pharmacy profession (pharmacist or pharmacy technician)? 1252

Yes

☐ 1

No

☐ 2

Q4J

Were organisational or business objectives discussed in your formal appraisal? 1253

Yes

☐ 1

No

☐ 2

Q4K

Were your learning and development needs as a pharmacy technician/ pharmacist discussed in your formal appraisal? 1254

Yes

☐ 1

No

☐ 2

Q4L

Are you currently working in another pharmacy related job? 1255

Yes

☐ 1

➔ Q5A

No

☐ 2

➔ Q7 (on page 10)

Job 2 (if applicable, otherwise go to Q7 on page 10)

Q5A

What is your job title? 1256-1305

SPARE 1306-1309

Q5B

How many hours do you typically work in this job? 1310-1309

. per week

Q5C**What type of setting do you practise in, in this job?**

1314-1315

Large multiple community pharmacy (Asda, Boots, Co-operative, Day
Lewis, Lloyds, Morrisons, Rowlands, Sainsbury's, Superdrug, Tesco) ☐ 01

Another multiple community pharmacy not listed above,
with 5 or more stores ☐ 02

Community pharmacy with 4 or fewer stores ☐ 03

Hospital pharmacy (NHS or private hospital) ☐ 04

Primary care (other than community pharmacy) ☐ 05

University, education or training provider ☐ 06

Pharmaceutical industry ☐ 07

Other (write in) 08

SPARE 1316-1324

Q5D**What is your employment status in this job?**

1325

Business owner (including pharmacy owner) ☐ 1

Locum/ self-employed/ freelancer/ contractor ☐ 2

Employee ☐ 3

Q5E

What is the postcode of your workplace? Enter postcode or tick box as appropriate. If you mainly work from home please enter your home postcode. We only need the first part of the postcode, e.g. S014.

Write in 1327-1330 or No fixed place ☐ 1326 1

Q5F

Is this a patient facing role? By patient facing we mean roles delivering care and services directly to individual patients or members of the public.

1331

Yes, all or most of the time ☐ 1

Yes, some of the time ☐ 2

Yes, occasionally ☐ 3

No, rarely or never ☐ 4

6

Q5G**What responsibilities do you have in this job?**

1332-1353
Please tick **all**
responsibilities that apply

1354-1375
Please tick your **three**
main responsibilities

Providing advice and information to patients and carers (for example: on medicine use, health promotion)	<input type="checkbox"/> 01	<input type="checkbox"/> 01
Providing advice and information to health professionals	<input type="checkbox"/> 02	<input type="checkbox"/> 02
Supplying medicines and medical devices (for example: supervising sales, selling, dispensing, accuracy checking)	<input type="checkbox"/> 03	<input type="checkbox"/> 03
Any other clinical work (for example: health checks, vaccinations, ward rounds)	<input type="checkbox"/> 04	<input type="checkbox"/> 04
Preparation and manufacturing of medicinal products (for example: extemporaneous/ aseptic preparation, accuracy checking)	<input type="checkbox"/> 05	<input type="checkbox"/> 05
Quality assurance of medicinal products and/ or their distribution (for example: batch checking, pharmacovigilance)	<input type="checkbox"/> 06	<input type="checkbox"/> 06
Management of staff	<input type="checkbox"/> 07	<input type="checkbox"/> 07
Routine tasks to manage the pharmacy environment (for example: disposal of medicines, ordering, receiving & checking stock)	<input type="checkbox"/> 08	<input type="checkbox"/> 08
Education, training, tutoring and research	<input type="checkbox"/> 09	<input type="checkbox"/> 09
Governance, policy, regulation and other administrative work	<input type="checkbox"/> 10	<input type="checkbox"/> 10
Development and management of pharmacy IT systems and technology	<input type="checkbox"/> 11	<input type="checkbox"/> 11

Q5H

In the last 12 months have you had a formal appraisal of your work in this job? By this we mean formal feedback on your performance in this role.

1376

Yes ☐ 1

No ☐ 2 ➔ **Q5L (on page 8)**

Q5I

Was the formal appraisal carried out by a peer in the pharmacy profession (pharmacist or pharmacy technician)?

1377

Yes ☐ 1

No ☐ 2

Q5J

Were organisational or business objectives discussed in your formal appraisal?

1378

Yes ☐ 1

No ☐ 2

Q5K

Were your learning and development needs as a pharmacy technician/ pharmacist discussed in your formal appraisal? 1379

Yes ☐ 1

No ☐ 2

Q5L

Are you currently working in another pharmacy related job? 1380

Yes ☐ 1 → **Q6A**

No ☐ 2 → **Q7 (on page 10)**

Job 3 (if applicable, otherwise go to Q7 on page 10)

Q6A

What is your job title? 1381-1430

SPARE 1431-1434

Q6B

How many hours do you typically work in this job? 1435-1438

per week

Q6C

What type of setting do you practise in, in this job? 1439-1440

Large multiple community pharmacy (Asda, Boots, Co-operative, Day Lewis, Lloyds, Morrisons, Rowlands, Sainsbury's, Superdrug, Tesco) ☐ 01

Another multiple community pharmacy not listed above, with 5 or more stores ☐ 02

Community pharmacy with 4 or fewer stores ☐ 03

Hospital pharmacy (NHS or private hospital) ☐ 04

Primary care (other than community pharmacy) ☐ 05

University, education or training provider ☐ 06

Pharmaceutical industry ☐ 07

Other (write in) 08

SPARE 1441-1449

Q6D**What is your employment status in this job?** 1450Business owner (including pharmacy owner) ☐ 1Locum/ self-employed/ freelancer/ contractor ☐ 2Employee ☐ 3**Q6E****What is the postcode of your workplace?** Enter postcode or tick box as appropriate. If you mainly work from home please enter your home postcode. We only need the first part of the postcode, e.g. S014.Write in 1452-1455

or

No fixed place ☐ 1451 1**Q6F****Is this a patient facing role?** By patient facing we mean roles delivering care and services directly to individual patients or members of the public. 1456Yes, all or most of the time ☐ 1Yes, some of the time ☐ 2Yes, occasionally ☐ 3No, rarely or never ☐ 4**Q6G****What responsibilities do you have in this job?**1457-1478
Please tick **all**
responsibilities that apply1479-1500
Please tick your **three**
main responsibilitiesProviding advice and information to patients and carers
(for example: on medicine use, health promotion) ☐ 01Providing advice and information to health professionals ☐ 02Supplying medicines and medical devices
(for example: supervising sales, selling, dispensing, accuracy checking) ☐ 03Any other clinical work
(for example: health checks, vaccinations, ward rounds) ☐ 04Preparation and manufacturing of medicinal products
(for example: extemporaneous/ aseptic preparation, accuracy checking) ☐ 05Quality assurance of medicinal products and/ or their distribution
(for example: batch checking, pharmacovigilance) ☐ 06Management of staff ☐ 07Routine tasks to manage the pharmacy environment
(for example: disposal of medicines, ordering, receiving & checking stock) ☐ 08Education, training, tutoring and research ☐ 09Governance, policy, regulation and other administrative work ☐ 10Development and management of pharmacy IT systems and technology ☐ 11

Q6H

In the last 12 months have you had a formal appraisal of your work in this job? By this we mean formal feedback on your performance in this role. 1501

Yes ☐ 1
No ☐ 2 ➔ Q7

Q6I

Was the formal appraisal carried out by a peer in the pharmacy profession (pharmacist or pharmacy technician)? 1502

Yes ☐ 1
No ☐ 2

Q6J

Were organisational or business objectives discussed in your formal appraisal? 1503

Yes ☐ 1
No ☐ 2

Q6K

Were your learning and development needs as a pharmacy technician/ pharmacist discussed in your formal appraisal? 1504

Yes ☐ 1
No ☐ 2

Section D: Work in Great Britain as a pharmacist prescriber in the last 12 months

Q7

Have you ever prescribed since your annotation in the register as a pharmacist prescriber? 1505

Yes ☐ 1
No ☐ 2 ➔ Q12 (on page 12)

Q8

In the past 12 months, which of these areas have you prescribed in as a pharmacist prescriber? Tick all that apply 1506-1541

I have not prescribed in the last 12 months ☐

➔ **Q12 (on page 12)**

- | | | | | | |
|--|--------------------------|----|----------------------------------|--------------------------|----|
| Antibiotics | <input type="checkbox"/> | 02 | Oncology - Paediatric | <input type="checkbox"/> | 10 |
| Anticoagulation | <input type="checkbox"/> | 03 | Pain management | <input type="checkbox"/> | 11 |
| Cardiovascular | <input type="checkbox"/> | 04 | Palliative care | <input type="checkbox"/> | 12 |
| Diabetes | <input type="checkbox"/> | 05 | Renal | <input type="checkbox"/> | 13 |
| Hypertension | <input type="checkbox"/> | 06 | Respiratory | <input type="checkbox"/> | 14 |
| Medication optimisation for elderly care | <input type="checkbox"/> | 07 | Substance misuse | <input type="checkbox"/> | 15 |
| Minor ailments | <input type="checkbox"/> | 08 | Total Parenteral Nutrition (TPN) | <input type="checkbox"/> | 16 |
| Oncology - Adult | <input type="checkbox"/> | 09 | Travel medicine | <input type="checkbox"/> | 17 |

Other (write in)

SPARE 1542-1654

Q9

In a typical week how many patients do you prescribe for as a pharmacist prescriber? 1555

- | | | |
|--------------|--------------------------|---|
| Fewer than 5 | <input type="checkbox"/> | 1 |
| 6-10 | <input type="checkbox"/> | 2 |
| 11-20 | <input type="checkbox"/> | 3 |
| 21-30 | <input type="checkbox"/> | 4 |
| 31-40 | <input type="checkbox"/> | 5 |
| 41-50 | <input type="checkbox"/> | 6 |
| 51+ | <input type="checkbox"/> | 7 |

Q10

In a typical week how many items do you prescribe as a pharmacist prescriber? 1556

- | | | |
|--------------|--------------------------|---|
| Fewer than 5 | <input type="checkbox"/> | 1 |
| 6-10 | <input type="checkbox"/> | 2 |
| 11-20 | <input type="checkbox"/> | 3 |
| 21-30 | <input type="checkbox"/> | 4 |
| 31-40 | <input type="checkbox"/> | 5 |
| 41-50 | <input type="checkbox"/> | 6 |
| 51+ | <input type="checkbox"/> | 7 |

11



Q11

In the last 12 months which of the following types of settings have you worked in as a pharmacist prescriber? Tick all that apply

1557-1562

Large multiple community pharmacy (Asda, Boots, Co-operative, Day Lewis, Lloyds, Morrisons, Rowlands, Sainsbury's, Superdrug, Tesco)

☐

01

Another multiple community pharmacy not listed above, with 5 or more stores

☐

02

Community pharmacy with 4 or fewer stores

☐

03

Hospital pharmacy (NHS or private hospital)

☐

04

Primary care (other than community pharmacy)

☐

05

Other

☐

06

Q13 (on page 13)

Q12

Why have you not practised as a pharmacist prescriber?

1563

Text 1 - No text 2
SPARE 1564-1579



Section E: Additional qualifications

Q13

In addition to the qualification(s) you needed to register, which, if any, of the following UK qualifications have you completed? Please only include qualifications that relate to your pharmacy practice. Tick all that apply 1580-1593

Further Education qualifications:

Accuracy Checking Pharmacy Technician ☐ 01

Certificate in Medicines Management ☐ 02

Other (write in) 03

Higher Education qualifications:

Graduate level
(Graduate certificate or diploma, Foundation or Bachelor's degree) ☐ 04

Postgraduate level
(Postgraduate certificate or diploma, Masters degree) ☐ 05

Doctoral
(PhD, Professional Doctorate) ☐ 06

Other (write in) 07

No - None of the above ☐ 08

Section F: Future plans for registration

Q14

Do you intend to renew your pharmacist/ pharmacy technician registration next time it comes up for renewal? 1594

Yes ☐ 1 ➔ **Q16A (on page 14)**

Undecided ☐ 2 ➔ **Q16A (on page 14)**

No ☐ 3 ➔ **Q15**

Q15

Why do you not intend to renew your pharmacist/ pharmacy technician registration?

Tick all that apply 1595-1612

I anticipate not being able to work due to an illness or disability ☐ 01

I anticipate not being able to work due to lack of work in my local area ☐ 02

I intend to work in a different sector (non-pharmacy) ☐ 03

I intend to leave the UK ☐ 04

I intend to go into full-time education ☐ 05

I intend to stop working to look after my family/ home ☐ 06

I intend to work in a pharmacy role that does not require registration ☐ 07

I intend to retire ☐ 08

Other reason (write in) 09

Section G: Work not related to pharmacy

Q16A Do you currently work in a paid non-pharmacy role (full-time or part-time) in Great Britain? 1613

Yes ☐ ₁ ➔ **Q16B**

No ☐ ₂ ➔ **Q17**

Q16B How many hours do you typically work in your non-pharmacy related job(s)? 1614-1617

. per week

Section H: Equality & diversity

The following questions relate to our equality and diversity work. We already have some information from your registration. The following add to our understanding of the diversity of the pharmacy profession, so that we can make sure our services and events reflect this diversity.

Q17 Do you consider yourself as having a disability? 1618

Yes ☐ ₁

No ☐ ₂ ➔ **Q19 (on page 15)**

Q18 What type of disability do you have? Please tick all areas affected 1619-1632

Mobility ☐ ₀₁

Manual dexterity ☐ ₀₂

Speech & language ☐ ₀₃

Hearing ☐ ₀₄

Sight ☐ ₀₅

Memory ☐ ₀₆

Other disability (write in) ₀₇

Q19

To which, if any, of the religions do you consider you belong?

1633-1634

No religion	<input type="checkbox"/>	01
Christian (including Church of England, Catholic, Protestant and all other Christian denominations)	<input type="checkbox"/>	02
Buddhist	<input type="checkbox"/>	03
Hindu	<input type="checkbox"/>	04
Jewish	<input type="checkbox"/>	05
Muslim	<input type="checkbox"/>	06
Sikh	<input type="checkbox"/>	07
Other religion (write in)	<input type="text"/>	08

Q20

What is your ethnic group?

1635-1636

White		Black/ Black British			
British	<input type="checkbox"/>	01	African	<input type="checkbox"/>	12
Irish	<input type="checkbox"/>	02	Caribbean	<input type="checkbox"/>	13
Other White background (write in)	<input type="text"/>	03	Any other Black background (write in)	<input type="text"/>	14
Asian/ Asian British		Mixed/ multiple ethnic group			
Indian	<input type="checkbox"/>	08	White and Black African	<input type="checkbox"/>	04
Pakistani	<input type="checkbox"/>	09	White and Black Caribbean	<input type="checkbox"/>	05
Bangladeshi	<input type="checkbox"/>	10	White and Asian	<input type="checkbox"/>	06
Other Asian background (write in)	<input type="text"/>	11	Any other mixed/ multiple ethnic background (write in)	<input type="text"/>	07
Chinese or other ethnic group					
Chinese	<input type="checkbox"/>	15			
Any other ethnic group (write in)	<input type="text"/>	16			



Thank you for your help

Please place the questionnaire in the enclosed pre-paid envelope and return to the address below:

NATCEN SOCIAL RESEARCH
101-135 KINGS ROAD
BRENTWOOD
ESSEX
CM14 5BR

Or call: 0800 652 0501