

# 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
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**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 ☐ 1

Working in a paid non-pharmacy role (full-time or part-time) in Great Britain ☐ 2

Temporarily away from work (e.g. maternity or paternity leave/ sick leave/ other approved leave) ☐ 3

In full-time education and intending to return to pharmacy practice in Great Britain ☐ 4

Unemployed but looking for paid pharmacy work (either full-time or part-time) in Great Britain ☐ 5

Other (write in)  6

**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 11)**

**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 11.**

**Job 1**

**Q4A**

**What is your job title?**

1121-1170

SPARE 1171-1175

**Q4B**

**How many hours do you typically work in this job?**

.  per week

1176-1179

**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?**

Business owner (including pharmacy owner) ☐ 1

Locum/ self-employed/ freelancer/ contractor ☐ 2

Employee ☐ 3

1200

**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 ☐ 1

1201

**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 11)

Job 2 (if applicable, otherwise go to Q7 on page 11)

**Q5A**

What is your job title?

1256-1305

SPARE 1306-1309

**Q5B**

How many hours do you typically work in this job?

1310-1313

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.

1327-1330

Write in     or No fixed place ☐ 1

1326

**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

**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 ☐ <sub>1</sub>

No ☐ <sub>2</sub>

**Q5L**

Are you currently working in another pharmacy related job?

1380

Yes ☐ <sub>1</sub> ➔ **Q6A**

No ☐ <sub>2</sub> ➔ **Q7 (on page 11)**

Job 3 (if applicable, otherwise go to Q7 on page 11)

**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) ☐ <sub>01</sub>

Another multiple community pharmacy not listed above, with 5 or more stores ☐ <sub>02</sub>

Community pharmacy with 4 or fewer stores ☐ <sub>03</sub>

Hospital pharmacy (NHS or private hospital) ☐ <sub>04</sub>

Primary care (other than community pharmacy) ☐ <sub>05</sub>

University, education or training provider ☐ <sub>06</sub>

Pharmaceutical industry ☐ <sub>07</sub>

Other (write in)  <sub>08</sub>

SPARE 1441-1449

Q6D

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

Business owner (including pharmacy owner)

☐

1

1450

Locum/ self-employed/ freelancer/ contractor

☐

2

Employee

☐

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.

1452-1455

Write in

or

No fixed place

☐

1

1451

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.

1456

Yes, all or most of the time

☐

1

Yes, some of the time

☐

2

Yes, occasionally

☐

3

No, rarely or never

☐

4

Q6G

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

1457-1478

Please tick **all**  
responsibilities that apply

1479-1500

Please tick your **three**  
**main** responsibilitiesProviding 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

**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 (on page 11)

**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

SPARE 1505-1579

#### Section D: Additional qualifications

**Q7**

**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 ☐ <sub>01</sub>

Certificate in Medicines Management ☐ <sub>02</sub>

Other (write in)  <sub>03</sub>

##### Higher Education qualifications:

Graduate level  
(Graduate certificate or diploma, Foundation or Bachelor's degree) ☐ <sub>04</sub>

Postgraduate level  
(Postgraduate certificate or diploma, Masters degree) ☐ <sub>05</sub>

Doctoral  
(PhD, Professional Doctorate) ☐ <sub>06</sub>

Other (write in)  <sub>07</sub>

No - None of the above ☐ <sub>08</sub>

#### Section E: Future plans for registration

**Q8**

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

1594

Yes ☐ <sub>1</sub> ➔ **Q10A (on page 12)**

Undecided ☐ <sub>2</sub> ➔ **Q10A (on page 12)**

No ☐ <sub>3</sub> ➔ **Q9**

**Q9**

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

Tick all that apply

1959-1612

I anticipate not being able to work due to an illness or disability ☐ <sub>01</sub>

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

I intend to work in a different sector (non-pharmacy) ☐ <sub>03</sub>

I intend to leave the UK ☐ <sub>04</sub>

I intend to go into full-time education ☐ <sub>05</sub>

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

I intend to work in a pharmacy role that does not require registration ☐ <sub>07</sub>

I intend to retire ☐ <sub>08</sub>

Other reason (write in)  <sub>09</sub>

## Section F: Work not related to pharmacy

**Q10A**

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

1613

Yes

☐

1

➔ Q10B

No

☐

2

➔ Q11

**Q10B**

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

1614-1617

per week

## Section G: 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.

**Q11**

Do you consider yourself as having a disability?

1618

Yes

☐

1

No

☐

2

➔ Q13 (on page 13)

**Q12**

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

**Q13**

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

1633-1634

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

**Q14**

**What is your ethnic group?**

1635-1636

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