The Association of Pharmacy Technicians UK (APTUK) is the professional leadership body for pharmacy technicians throughout in the United Kingdom. We are the only body that represents pharmacy technicians and all sectors of pharmacy in the UK. The APTUK, through strong, influential representative leadership, supports patient centred professionalism by encouraging in our membership, the attitudes and behaviours associated with outstanding healthcare professionals. We work on behalf of pharmacy technicians, championing and safeguarding the pharmacy technician profession, enhancing the education and scope of practice. To achieve our objectives and goals APTUK works closely and collaboratively with the other pharmacy organisations to help deliver professional excellence and identify the views of a range of pharmacy stakeholders in number of forums.

Pharmacy Technicians are healthcare professionals who are registered with the General Pharmaceutical Council (GPhC) for their license to practise. They are skilled professionals and essential members of the healthcare and pharmacy team, who broadly review, prepare, dispense, check, supply and issue a wide range and variety of medicines to patients. They also take an active role in providing patients with guidance on taking medicines and leading the dispensary team and operational services. As registered professionals, they are responsible and accountable for their own accurate and safe practice.

APTUK acknowledges that the roles of Pharmacy Technicians and that of other health care professionals need to evolve to meet the increased demands being placed on NHS services as outlined in the Five Year Forward View (FYFV), Medicines Value Programme, Community Pharmacy Forward View, Prudent Health and A Healthier Wales: Our Plan for Health and Social Care and Achieving excellence in pharmaceutical care: a strategy for Scotland.

Over the last five years the GPhC have made significant improvements to how it regulates registered pharmacies. The GPhC now wants to further develop its approach, to provide greater assurance to patients and the public and the pharmacy sector that registered pharmacies are meeting standards, and to further drive continuous improvement in the quality of pharmacy services and care.

The GPhC is proposing the following changes:

1. Changes to the types of inspections – moving to a new model that includes three types of inspection: routine inspections, intelligence-led inspections and themed inspections. This will help to make sure the GPhC is more agile and responsive to information it holds, intelligence it receives and issues it identifies within pharmacy.

2. Moving to unannounced inspections as a general rule. This will make sure the outcomes of the inspection reflect whether the pharmacy is meeting the standards every day.

3. Changing inspection outcomes – there would be two possible outcomes for an inspection overall (‘standards met’ or ‘standards not all met’), and four possible findings at the principle level (‘standards not all met’, ‘standards met’, ‘good practice’ and ‘excellent practice’).

4. Requiring all standards to be met to receive an overall ‘standards met’ outcome – if any standard was found not to be met, this would result in a ‘standards not all met’ outcome overall.

5. Publishing inspection reports and improvement action plans when relevant, on a new website. This will be designed so that the information is easy to search and analyse. 6 Sharing examples of notable practice – by publishing these in a ‘knowledge hub’ on the new website to encourage continuous learning and improvement in pharmacy.

APTUK sought the views of the Board of Directors and the Professional Committee in collating the professional leadership body’s response to the consultation as below. The consultation closed on the 9th August 2018.
Consultation on developing our approach to regulating registered pharmacies

May 2018
Section B – Responding on behalf of an organisation

Please tell us your:

Name:

Association of Pharmacy Technicians UK

Address: One Victoria Square, Birmingham, B1 1BD

If you want any part of your response to stay confidential, please explain why you think the information you have given is confidential. We cannot give an assurance that confidentiality can be maintained in all circumstances.

D Please keep parts of my organisation's response confidential

Please explain which parts you would wish to keep confidential.

1. Are you responding on behalf of a registered pharmacy?
   D Yes (please go to Q2)
   D No (please go to Q3)

2. Please choose the option below which best describes the pharmacy you represent.
   D Community pharmacy (please go to Q4)
   D Hospital pharmacy (please go to the consultation questions)
   D Primary care organisation (please go to the consultation questions)
   D Other (please give details)

3. Please choose the option below which best describes your organisation.
   D Organisation representing patients and the public
   D Organisation representing pharmacy professionals or the pharmacy sector
   D NHS organisation or group
   D Research, education or training organisation
D Government department or organisation
D Regulatory body
D Other (please give details)

4. Which of the following best describes the community pharmacy that you own or work in?

D An independent pharmacy or pharmacy chain (1-5 pharmacies)
D A small multiple pharmacy chain (6-20 pharmacies)
D A large multiple pharmacy chain (21 or more pharmacies)
Consultation questions

We are particularly interested in your views on the following points, although we welcome your comments on any issues that you want to raise about our proposed approach to regulating registered pharmacies.

Section 1: Introducing new types of inspection

In the Introducing new types of inspection section, we describe the changes we plan to make to the types of inspections we carry out.

1. Do you think the three types of inspection (routine, themed and intelligence-led) will:
   - provide more assurance that pharmacies are meeting our standards?
     - Yes ☑
     - No
     - Don’t know
   - enable us to be more agile and responsive to risks or changes in pharmacy or healthcare?
     - Yes ☑
     - No
     - Don’t know
   - help to drive improvements through identifying and sharing good practice?
     - Yes ☑
     - No
     - Don’t know

Please give comments explaining your responses.

APTUK support the approach to the 3 proposed types of Inspections as they appear to cover the breadth of inspection models required to provide the public and patients with the confidence they need when using the pharmacy of their choice. It continues to be important that pharmacies are routinely inspected and that they can assure that they are consistent in their in the delivery of their services and show that the GPhC standards are met on a daily basis. It is an absolute MUST that the GPhC can respond quickly and appropriately to any concerns that are raised where patient safety appears to be compromised which may include staffing levels under principle 2 of the standards for registered premises. Thus using a risk based approach for all 3 models is more appropriate and proportionate.

2. Do you have any other comments about the types of inspection?

APTUK support the themed inspection model approach as this will provide a model for continuous improvement and synchronises aligns with other approaches for sharing and learning. It also aligns with professional leadership body approaches and outcomes can be utilised to support sharing of good practice.
Section 2: Unannounced inspections

In the Unannounced inspections section, we describe our plans to move from announced to unannounced inspections as a general rule for routine and intelligence-led inspections.

3. Do you think that moving from announced to unannounced inspections as a general rule will provide more assurance that pharmacies are meeting our standards everyday?

D Yes ☑
D No
D Don’t know

Please give comments explaining your response.

As a general rule APTUK feel that unannounced inspections would provide the public and patients with more assurance as this is ‘real’ time and could be more reflective and realistic of everyday practice. It could also serve to highlight and evidence a high level of workplace pressure that the regulator could address. This would be the ideal, however APTUK are cognisant that this could add additional pressure and agree that some announced inspections may not be possible in the interest of patient safety. In the current environment it might be useful to ‘test’ how many pharmacies this might apply too. An alternative is to shorten the prior notice period to allow for adjustments in staffing levels on a given day but not so long that normal practice could be altered.

4. We have identified instances when it may not be possible to have an unannounced inspection. Are there any other instances we need to consider?

D Yes ☑
D No
D Don’t know

5. Please describe the other instances we should consider.

National or local emergencies or conditions that mean a pharmacy might not be working under normal circumstances.

Ie epidemics or pandemics etc

6. Do you have any other comments on us carrying out unannounced inspections as a general rule?

To support staff engagement and management of an inspection visit, although there are a number of written resources on the GPhC website, it would be useful for the GPhC to run sessions on ‘Get set for a GPhC inspection’. APTUK are aware that other organisations deliver sessions regularly on inspection preparation. Although there are two useful video’s on what to expect on the website, these are narrated by GPhC staff.

To support all staff involved, particularly for unannounced inspections, it would be useful to show snippets of an inspection being carried and what might be expected from the staff on the day.
Section 3: Changes to the outcomes of an inspection

In the *Changes to the inspection outcomes* section of the consultation document we describe the changes we plan to make to the outcomes of an inspection.

7. We propose having two possible overall outcomes from an inspection - 'standards met' and 'standards not all met'. Do you think this will make it clear to patients, the public and pharmacy owners that a pharmacy has met, or not met, the standards?
   - D Yes [☑]
   - D No
   - D Don’t know

Please give comments explaining your response.

The GPhC guidance narrative that sits alongside this consultation suggests that patients and the public in the focus group were satisfied with these statements. APTUK suggest that it is made extremely clear on the report whether the standards have been met or not as this is the difference of just ONE word. We agree with the approach of not using PASS or Fail.

APTUK feels this should be clear to pharmacy owners alongside the clear and SMART improvement plan required if not all the standards have been met.

8. We propose having four possible findings for each of the principles - 'standards not all met', 'standards met', 'good practice' and 'excellent practice'. Do you think this will:
   - provide owners, their teams and the GPhC with a way of measuring performance?
     - D Yes [☑]
     - D No
     - D Don’t know
   - continue to drive improvement?
     - D Yes [☑]
     - D No
     - D Don’t know

Please give comments explaining your responses.

APTUK feel this would provide a measurement model and support improvement if the narrative under the four headings is SMART and clear and standardised between inspectors, so there is a consistent style.
Patients have told us that a pharmacy should meet all the standards to receive a 'standards met' outcome. This means that not meeting one standard would result in the pharmacy receiving an overall outcome of 'standards not all met'.

9. Do you think that not meeting one standard should result in the pharmacy receiving an overall outcome of 'standards not all met'?  
   D Yes ☑  
   D No  
   D Don’t know

Please give comments explaining your response.

APTUK understand the patients and the public need to have this clarity, however agree with the GPhC narrative within the consultation guidance that inspectors should use their judgment on whether patient safety is compromised by on ‘quite’ meeting any of the standards. Again this requires a consistent approach by the inspectors to be fair and equal within all pharmacy inspections.

10. Do you have any comments about the proposed wording of the overall outcome of an inspection, that is 'standards met' or 'standards not all met'?  
   As above

11. Do you have any other comments on the changes we are proposing to the outcomes of an inspection?  
   As above: consistency within inspections if key to fair assessment

Section 4: Publication

In the Publication section we describe our plans to publish individual inspection reports for routine and intelligence-led inspections and a composite report for themed inspections.

12. Do you think we should publish inspection reports?  
   D Yes ☑  
   D No  
   D Don’t know

Please give comments explaining your response.

Publishing inspection outcomes within healthcare and education is common place and should also apply to pharmacy to allow patients and the public to make an informed choice as to which pharmacy they use.
13. Do you think publishing inspection reports will:

- provide greater transparency about the outcome of an inspection?
  
  D  Yes ☑
  D  No
  D  Don’t know

- provide assurance to users of pharmacy services that pharmacies have met the standards?
  
  D  Yes ☑
  D  No
  D  Don’t know

- enable the pharmacy sector as a whole to use the information in the reports to improve?
  
  D  Yes ☑
  D  No
  D  Don’t know

Please give comments explaining your responses.

APTUK believe that publishing the reports can provide patient and the public with assurance as long as the reports are understandable and provide clear information on good/excellent practice and what needs to improve. Pharmacy users can then make an informed decision.

14. Do you have any suggestions about the intended format and content of the summary and detailed inspection reports? You can see samples of the new report templates on our website.

The style of the report looks clear and the colours and ticks and crosses give a quick visual guide

15. Do you think we should publish improvement action plans?

D  Yes ☑
D  No
D  Don’t know

Please give comments explaining your response.

APTUK believe that a summary of action plans for improvement should be available to the pharmacy users. This is invaluable to making a customer informed decision. It may be a particular standard highlighted is of particular interest to one patient but not to another.
16. Do you think pharmacy owners should be expected to display the inspection outcome in the pharmacy?

- Yes ☐
- No ☐
- Don’t know ☑

Please give comments explaining your response.

APTUK have ticked ‘Don’t Know’ as this is a tricky area. Pharmacies with good inspection outcomes would wish to display this. However if the outcome is not as positive this could be misleading as it may only be one standards that is deficient and this might be rectified very quickly. What should be clear is that an inspection has recently taken place and where the report information can be found.

Section 5: The website and knowledge hub

In the Website and knowledge hub section of the consultation document we describe our plans to publish the reports on an interactive website and to introduce a knowledge hub for highlighting and sharing examples of standards not being met and of good and excellent practice.

17. Do you think the interactive website and knowledge hub will:

- make information easily accessible?
  - Yes ☑
  - No ☐
  - Don’t know ☐

- encourage the sharing of knowledge within the pharmacy sector?
  - Yes ☑
  - No ☐
  - Don’t know ☐

- enable learning from examples of standards not being met, and of good and excellent practice?
  - Yes ☑
  - No ☐
  - Don’t know ☐

- drive improvements within pharmacy?
  - Yes ☑
  - No ☐
  - Don’t know ☐
Section 6: Publication process

In the *Publishing inspection reports* section, we describe the process we will follow when quality assuring and publishing inspection reports.

18. Do you have any comments about the publication process?

Part of the new process indicates that there will be a process of review if the pharmacy owner does not agree with the report.

To provide a robust quality assurance there should be an appeals and complaints process that is clear, easy to follow and transparent from the outset.

Section 7: Impact of the proposals

19. What kind of impact do you think the proposals will have on people using pharmacy services?

- D Positive impact
- D Negative impact
- D Both positive and negative impact
- D No impact
- D Don’t know

Please give comments explaining your response.

APTUK feel there could be both positive and negative impacts. It is anticipated that this would be mainly positive but for some pharmacy users if they do not understand the inspection model it may be confusing particularly if their regular pharmacy is judged as ‘standards not met’ and they don’t understand why or the basis of the judgement.

As always the messaging and communication must be crystal clear.

20. What kind of impact do you think the proposals will have on the owners of registered pharmacies?

- D Positive impact
- D Negative impact
- D Both positive and negative impact
- D No impact
- D Don’t know
21. What kind of impact do you think the proposals will have on the pharmacy team?

- **Positive impact**
- **Negative impact**
- **Both positive and negative impact**
- **No impact**
- **Don’t know**

Please give comments explaining your response.

As above – any detrimental effect could impact on both patients and owners.

APTUK feel that the principles are sound and it should have a mainly positive effect particularly by sharing and learning from good practice examples.

Again the messaging must be clear.

22. Do you think anything in the proposed changes would have an impact-positive or negative-on certain individuals or groups who share any of the protected characteristics listed above?

- **Yes**
- **No**
- **Don’t know**

Please give comments explaining your response.

We want to understand whether our proposals may discriminate against or unintentionally disadvantage any individuals or groups sharing any of the protected characteristics in the Equality Act 2010. These characteristics are:

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

Accessing the inspection reports online may be a limiting factor for some pharmacy users, possibly the elderly who use pharmacies in volume.

Hence the ‘don’t know’ for displaying reports in the pharmacy.
23. Do you think there will be any other impact of our proposals which you have not already mentioned?

☐ Yes
☐ No
☐ Don’t know