



# Royal Pharmaceutical Society of Great Britain

Helping pharmacists achieve excellence

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Dear Colleague

CORPORATE AND STRATEGIC  
DEVELOPMENT DIRECTORATE

Policy Development

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## **RPSGB consultation on its response to the Foster & Donaldson reports**

The Department of Health (England) published the outcomes of the Foster and Donaldson reviews on the regulation of healthcare professionals in July (*The regulation of the non-medical healthcare professions* and *Good doctors, safer patients*). These reports have profound implications for the future regulation of the health professions and for pharmacy and the RPSGB specifically. The RPSGB wants to consult as widely as possible with members of the pharmacy profession and other stakeholders to help it draw up a response to those reports.

The Society's Council will have discussed the reports and the Society's response on three occasions before the response is submitted. The views of pharmacy organisations, groups and individual members will be fed into those discussions. The main issues we will be responding to the government on are:

1. The need to clarify the separation of the RPSGB's regulatory and professional lead functions. The Council will need to consider options for clarifying/separating the RPSGB's regulatory and professional lead functions [recommendation 24 of the Foster Report].
2. Proposed changes to the composition of the regulators' Councils – replacing some/all of the elected professional members with appointees, and possible changes to the future balance of professional and lay council members [recommendations 19 and 20].
3. Proposals for the RPSGB to share functions with PSNI, followed by a formal merger into a single UK body [recommendation 24].
4. The overall system of regulating the health professions – integrated with health services and employers' systems, and risk-based [recommendations 1-3].
5. Revalidation – which the Foster report says "is necessary for all professionals", going on to say that "the regulatory body needs to be in charge of setting the standard which a person must meet to stay on the register" and "Information already collected by the employer/commissioner should be used to meet both their and the regulator's needs [recommendations 4 -8].
6. Proposals on the investigation of complaints, including a 'single portal' and a single local investigation process [recommendations 9, 10 and 11 and see also the Donaldson report's recommendations on local GMC affiliates].
7. Proposals on adjudication, setting out three options: a single adjudicator for all the health professions, no change to the current system, or separate adjudication as now but with shared panellists working to common standards [recommendations 12 and 13].
8. Regulation of support staff [recommendation 16].

9. Other issues re. the role, structure, functions, governance and numbers of regulatory bodies including common standards for conduct and relevant areas of education; replacement of the regulatory bodies' Presidents on the Council for Healthcare Regulatory Excellence with appointed members; multi-professional regulation and the role of professional bodies; and the number of regulators [recommendations 18-24].
10. Ongoing review of the regulators up to 2011.

Copies of the government reports can be found on the DH website under Live Consultations (Gateway reference 6856) at [http://www.dh.gov.uk/Consultations/LiveConsultations/LiveConsultationsArticle/fs/en?CONTENT\\_ID=4137231&chk=/Ee/%2Bi](http://www.dh.gov.uk/Consultations/LiveConsultations/LiveConsultationsArticle/fs/en?CONTENT_ID=4137231&chk=/Ee/%2Bi)

Please send your views and comments by **midday Monday 9<sup>th</sup> October** by email to [Karen.turnham@rpsqb.org](mailto:Karen.turnham@rpsqb.org) or to her at the above address.

I look forward to hearing from you.

Yours sincerely

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