Assembly Meeting Wednesday 27th March 2024 OPEN BUSINESS



## **Assembly Meeting**

To be held at 9.00 am to 16.00 pm on Wednesday 27th March 2024

Agenda - Open Business

1. Welcome to Assembly members & apologies for absence 9.00

#### **ITEMS FOR NOTING**

Members are advised that no discussion will be held on these items at the meeting unless a member notifies the President 48 hours in advance of the meeting of any point they wish to raise

- **2.** a) Code of Conduct & Remit of Assembly
  - b) Declarations of interest
  - c) Minutes of the Open Business the Assembly meeting 22nd November 2023
  - d) Updates from the National Boards
  - e) President's Report
  - f) Treasurer's Report
  - g) Education & Standards \*
  - To note the minutes of the ESC meeting held on 14th February
  - h) Education/Professional Development/A&C Update
  - i) Science & Research
  - To note the minutes of the SRC meeting held on 4th February
  - j) Inclusion & Diversity
  - k) 2024 Events

To note the calendar of dates for events planned for the coming year

#### 3. Matters arising from the Open Business minutes not specifically included on

the agenda 9.05 – 9.20

None

- 4. Constitution & Governance Review 9.20 9.35 Verbal update on work to date *Chief Executive*
- 5. Luther Pendragon Comms Review 9.35 10.35 To receive an update on implementation of recommendations *Head of Strategic Communications*
- 6. UKPPLAB 10.35 10.40 To receive a verbal update *President*
- National Honours 10.40 11.10 To discuss raising profile for member nominations *Pharmaceutical Scientist Assembly Member*

- 8. Any other business 11.10 11.20 Any other items of business to be notified to the President 48 hours before the meeting
- Date of next meeting 11.20 To note the date of the Induction Day 16<sup>th</sup> July and Assembly Meeting 17<sup>th</sup> July



# ROLE OF ASSEMBLY (Regulations)

#### 4.0 ASSEMBLY

#### 4.1 Function

The Assembly is the governing body of the Society. Its overarching purpose is to ensure that the Society is led and governed effectively in pursuit of its Charter objectives, and to provide full fiduciary oversight and budgetary control. It maintains the overall strategic direction on all GB-wide issues and is responsible for the sound financial management of the Society.

Its main tasks are to:

- agree the values, tone and ethos of the Society
- enhance and protect the reputation of the Society and the profession
- agree the overall strategic direction and top level objectives of the Society, including European and other international dimensions
- allocate resources
- delegate authority to other governance bodies
- appoint, direct and set broad objectives for the Chief Executive
- monitor performance of Chief Executive and ensure conformance
- account to the membership
- oversee membership critical issues

#### ROLE OF CHAIRS & OFFICERS' GROUP (Regulations Appendix H)

The Chairs' and Officers' Group (COG) exists to provide a mechanism for making decisions on major issues on behalf of the Assembly that require urgent action and that do not fall within the delegated authorities of other governance bodies with appropriate meeting dates and cannot wait for a decision at the next Assembly meeting.

COG is authorised by Assembly to:

• appoint the Chair and members of the Audit and Risk Committee

• deal with issues arising which require an urgent response that do not fall within the delegated authorities of other governance bodies. Where this concerns new policy, actions would be subsequently ratified by the Assembly as appropriate

• deal with any specific matters delegated by the Assembly

Any actions/decisions agreed by COG should be communicated immediately to the members of the Assembly, unless precluded from doing so by confidentiality. Minutes of meetings will be included in the confidential business of the next Assembly meeting and any decisions that need to be ratified by Assembly members will be done so at that time.

# CODE OF CONDUCT FOR MEMBERS OF THE SOCIETY (Regulations)

#### **APPENDIX A - CODE OF CONDUCT**

Assembly may create, and from time to time amend or rescind, a Code of Conduct to be observed by all members of the Society. Breaches of the Code may, upon proper investigation under the process set out in the appropriate Regulations, lead to a Disciplinary Panel hearing which may, in turn, depending on the nature of the breach, ultimately lead to expulsion from the Society.

#### a) All Members

Being a member of the RPS is a mark of professionalism and members, as ambassadors of the Society, should do nothing that might detract from the high standing of the profession. This includes any aspect of a member's personal conduct which could have a negative impact upon the profession. On admission to, and annually on renewal of membership, all members must therefore:

- be in good standing professionally, including with the Society and any other professional body or regulator of which they are a member or registrant
- conduct themselves in a manner that upholds and enhances the reputation of the Society
- further the interests of and maintain the dignity and welfare of the Society and the profession
- exercise their professional skills and judgement to the best of their ability, discharge their professional responsibilities with integrity and do all in their power to ensure that their professional activities do not put the health and safety of others at risk
- when called upon to give a professional opinion, do so with objectivity and reliability
- be truthful and honest in dealings with clients, colleagues, other professionals and all they come into contact with in the course of their duties
- never engage in any activity that will impair the dignity, reputation or welfare of the Society, fellow members or their profession
- never knowingly engage in any corrupt or unethical practice
- not implicate the Society, through direct reference or use of membership status, in any statement that may be construed as defamatory, discriminatory, libellous, offensive, slanderous, subversive or otherwise damaging to the Society
- if convicted of a criminal or civil offence anywhere in the world inform the Society promptly, and provide such information concerning the conviction as the Institution may require. NBthis does not included Fixed Penalty Notice offences.
- observe the Policies of the Society
- comply with the Society's Regulations and all applicable laws

#### Conduct

If a member generally becomes aware of, or has reasonable grounds for believing, that another member is engaged in or has engaged in conduct which is in breach of the Regulations and/or Code of Conduct of the Society, they shall inform the Society in writing of that belief, but shall not maliciously or recklessly injure or attempt to injure, directly or indirectly, the reputation, practice, employment or livelihood of another member.

Complaints about the professional practice, performance or conduct of a member should be referred to the General Pharmaceutical Council, and any action by the Society may be postponed until the outcome of the Council's proceedings is known.

If the complaint is summarily dismissed by the General Pharmaceutical Council, the procedures set out in the Conduct Scheme for Members will be followed.

If the complaint is the subject of proceedings before a court or other regulatory authority, any action by the Society shall be postponed until the outcome of those proceedings is known, but is not obliged to do so. The Society is entitled to conduct its own investigations and implement its own decisions in accordance with the Society's Regulations and conduct procedures independently from the General Pharmaceutical Council, courts or any other authority.

In exceptional circumstances, the Society may take action in advance of a decision of a court or regulatory authority, in which case the complaint shall be referred to the Chairman of the Membership Committee, and the procedures set out in the Conduct Scheme for Members will be followed.

#### **Bullying or harassment**

The Society aims to create an environment which respects the dignity of all individuals, including but not limited to individuals who are Members, members or employees, those who provide services to the Society or conduct business on behalf of the Society or who come into contact with anyone connected to the Society.

Bullying, harassment, or victimisation of any will not be tolerated.

Bullying is offensive, intimidating, malicious or insulting behaviour, and/or misuse or an abuse or misuse of power that is meant to undermine, humiliate or injure the person on the receiving end.

Harassment is any unwanted physical, verbal or non-verbal conduct which has the purpose of violating another person's dignity or creating an intimidating, hostile, degrading, humiliating or offensive environment for another person, or is reasonably considered by that person to have the effect of violating their dignity or creating such an environment, even if this effect was not intended by the person responsible for the conduct. A single incident or a pattern of multiple incidents of this type of behaviour can amount to harassment and/or bullying. It also includes treating someone less favourably because they have submitted or refused to submit to such behaviour in the past.

Any of these behaviours will always be viewed extremely seriously and may result in disciplinary action being taken including, or where appropriate, summary dismissal, removal from office, termination of a contract to provide services or membership of the Society.

#### b) Additional Code for Governance Body Members

In addition to observing the Code of Conduct for Members of the Society, members elected or appointed to the Assembly, National Pharmacy Boards or any other governance body reporting to the Assembly shall:

- observe the Code of Conduct for Governance Body Members
- act collectively in discharging the functions of the relevant governance body, abiding by and supporting any decisions made
- respect the skills, roles and dignity of staff and other members participating in governance
- not exploit their position as a member of a governance body for personal or business gain, financial or otherwise

#### Duties

All Assembly/Board members and other governance body members are expected to perform their duties (whether statutory, fiduciary or common law) faithfully, diligently and to a standard commensurate with the functions of the role and their knowledge, skills and experience. They shall also have regard to the general duties of directors including the duty to act, in good faith, in such a way that promotes the success of the Society for the benefit of its members as a whole.

Governance body members shall take due note of any legal advice provided to the Society. Although the ultimate decision in a matter will rest with the relevant governance body or post holder, such a decision should be informed by the legal advice provided to the Society and not taken unilaterally.

Assembly and Board Members are not authorised on behalf of the Society to enter into any legal agreements or other commitments or contracts on behalf of the Society. Only in exceptional circumstances should an elected member be specifically authorised to sign an agreement on the Society's behalf, and in those circumstances instructions should be provided by the Chief Executive to the Society's Legal team.

#### Collegiality

Any governance body member, whether they dissent, abstain or are absent from the making of a decision by the relevant governance body, accepts the majority decision and is bound by it. Decisions taken collectively by any committee/group/governing body of which the member is a part must be fully respected and the principle of "collective responsibility" for such decisions observed. A governance body member can require their dissention to be recorded, but this does not absolve them from collective responsibility.

Although governance body members may legitimately disagree with the Society leadership, direction, policy and decision-making, any comments made about such policies/decisions should be made in a way which makes it clear that they are the member's personal views and not be made in such a manner as to bring the reputation of the Society into disrepute.

If, after weighing carefully the potential effects on the Society's wider objectives and reputation, a governance body member considers that a matter is of such importance that they feel compelled publicly to oppose a decision of the particular governance body, the member should if possible inform the relevant Chair, or in the case of a Board Chair, the President, in advance. If this is not possible the relevant Chair , or in the case of a Board Chair, the President, should be informed as soon as possible after. The governance body member may then express their personal views on the

matter but, in so doing, must first explain the relevant governance body's policy and the reason(s) for the governance body arriving at this policy.

It is acceptable for a member to dissent from a governance body decision from a moral/conscience perspective but they should fully explain the reasons for doing so to the Assembly.

#### Confidentiality

Governance members agree to keep all Confidential Information confidential and not to use or disclose it, or make any statement which might risk the disclosure of confidential information, except as authorised or required in connection with their appointment and to use their best endeavours to prevent the use or disclosure of it by any other person. This restriction will cease to apply to information which becomes public knowledge otherwise than through any unauthorised disclosure or other breach.

Governance members accept that, with the exception of personal journals or diaries, all confidential records in any medium (whether written, computer readable or otherwise) including accounts, documents, drawings and private notes about the Society and its activities and all copies and extracts of them made or acquired in the course of their appointment will be:

- the Society 's property
- used for the Society 's purpose only
- returned to the Society at any time on demand
- returned to the Society or destroyed without demand upon the termination of your appointment

The Society makes no claim to personal journals or diaries, however members agree to safeguard, using reasonable security measures, any personal journal or diary that contains sensitive or confidential Society information. Members further guarantee that upon the termination of their appointment, they will redact any highly sensitive data that may be recorded in any personal journal or diary. The Society accepts this personal guarantee on an honour basis, made in good faith, and will not seek at any time to see an individual's personal journal or diary.

'Confidential Information' means information (in whatever form and howsoever held) relating to the business, products, affairs and finances of the Society or of any Group Company or joint venture for the time being confidential to it or to them, and trade secrets (including, without limitation, technical data and know-how) relating to the business of the Society or of any Group Company or joint venture or of any of its or their suppliers, clients or customers including in particular (by way of example only and without limitation):

- terms of business with clients/customers and prices charged
- the identity of the Society or any Group Company's clients/customers and members
- the subscriber database
- specific contact details and terms of business with clients, customers, their requirements and prices charged
- draft publications and publications
- business plans, strategies (including pricing strategies) marketing plans and sales forecasts
- confidential management and financial information and data, results and forecasts (including draft, provisional and final figures), including dividend information, turnover and stock levels, profits and profit margins

- confidential financial information and data relating to the Society's and any Group Company's clients/customers
- information relating to industry knowledge and research, research activities, inventions, secret processes, designs, formulae and product lines
- any information which is treated as confidential or which you are told or ought reasonably to know is confidential
- any information which has been given to the Society or any Group Company in confidence by members, customers, clients, suppliers or other persons, or that you created, developed, received or obtained in connection with your providing the services, whether or not such information (if in anything other than oral form) is marked confidential

This shall not prevent any individual from disclosing information which they are entitled to disclose under the Public Interest Disclosure Act 1998, provided that the disclosure is made in accordance with the provisions of that Act.

#### Intellectual Property

Governance Members agree to promptly disclose to the Society all work and all Intellectual Property arising from any Work provided by them.

Governance Members agree to assign (by way of present and future assignment) with full title guarantee all Intellectual Property in any Work to the Society (or any Group Company designated by the Society) including (with effect from their creation) all future rights and waive such rights (including moral rights) as are not capable of being assigned.

Governance Members will at the request and reasonable expense of the Society:

- supply all information, data, drawings, software or other materials and assistance as may be required to enable the Society (or any Group Company) to fully exploit any Intellectual Property and Work to its best advantage as determined by the Society
- execute all documents and do all things necessary or desirable to vest ownership of Intellectual Property in any Work or otherwise belonging to the Society in the Society (or any Group Company) and/or to obtain patent or other protection for the Intellectual Property in such parts of the world as the Society (or any Group Company) may specify.

'Intellectual Property' means copyright, rights in inventions, patents, know-how, trade secrets, trademarks and trade names, service marks, design rights, rights in get-up, database rights and rights in data, semiconductor chip topography rights, mask works, utility models, domain names and all similar rights and, in each case: (i) whether registered or not, (ii) including any applications to protect or register such rights, (iii) including all renewals and extensions of such rights or applications, (iv) whether vested, contingent or future and (v) wherever existing;

'Work' means any information, data, drawings, software or other materials or work created or provided by you (either alone or jointly with others) arising from this Agreement or any duties assigned to you by the Society (or any Group Company).

#### **Return of RPS Property**

At the end of their term of office, however arising, or at any time at the Society's request, governance members shall immediately return to the Society or destroy all documents, records, papers or other property belonging to the Society or any Group Company which may be in their possession or under their control, and which relate in any way to the Society's or of any Group Company or joint venture or any of its associations business affairs and shall not retain any copies thereof. This requirement shall not apply to a single copy of confidential information kept for legal, accounting or professional purposes which members warrant to keep secure in exchange for reasonable personal use. Members may be asked to certify in writing that they have complied with these requirements.

#### Conduct

A member of a governance body must inform the Chief Executive if he/she is subject to proceedings (but excluding any preliminary investigations) before a regulatory or licensing body, or has been charged with any criminal offence.

Where a member is subject to such proceedings or has been charged with any criminal offence the Chief Executive will put to the Assembly a resolution calling for the suspension of that member from office and from any governance body pending the outcome of the proceedings against the member under the relevant procedures in the Regulations and Conduct Scheme for Members. If the conclusion/outcome of the proceedings is that the member is not guilty of charges against him a resolution will be put to the Assembly for the suspension from office or governance to be lifted with immediate effect.

Where a member has been convicted of an offence which may be relevant to his membership of a governance body, then the matter will be referred to the Assembly who will deal with the matter in accordance with the relevant procedures as set out in the Regulations.



#### **Assembly Meeting March 2024**

#### **DECLARATION OF INTERESTS**

#### **Claire Anderson**

- Professor of Social Pharmacy, School of Pharmacy, University of Nottingham
- Trustee Commonwealth Pharmacy Association
- Member, UKPPLAB

#### **Andrew Carruthers**

- Associate Director Care Quality & Professional Development, Scottish Ambulance Service
- RPS CPCS Chair
- Self-employed, community locum pharmacist

#### **Ciara Duffy**

- Quality Manager/Qualified Person at Novartis
- Directorship Duffy Quality Pharma Consulting
- Sister National Lead Pharmacist Interface
- Sister HSE Pharmacist
- Brother in law Regulatory Pharmacist Uniphar

#### **Ruth Edwards**

- University of Wolverhampton substantive employment
- Associate & Accreditation Team Leader GPhC
- Pharmaceutical Press Author
- Royal College of Surgeons, Ireland external examiner
- PDA member

#### **Thorrun Govind**

- Healthcare Advisory Solicitor- Hempsons
- Locum Pharmacist-various pharmacies
- Pharmthorrun Ltd
- Pharmacist Boots
- ProperG Ltd
- PDA indemnity
- Brother- Superintendent Pharmacist
- Father- Pharmacy Director
- Contribute to media press/tv
- Consultancy work with companies eg Haleon
- Commonwealth Pharmacy Association- Representative for RPharms
- Member of the Law Society
- Adviser at iEthico
- Menopause Mandate

#### **Brendon Jiang**

- Senior Clinical Pharmacist, NORA PCN
- Primary Care Network Clinical Lead Pharmacist for Oxfordshire, OCCG/BOB ICS
- Medicines and Prescribing Associate, NICE
- Committee member of the Primary Care Pharmacy Association
- Member of the Guild of Healthcare Pharmacists
- Superintendent pharmacist of Wychwood Pharmacy.
- Consultancy on pharmacy development– Oxfordshire Training Hub.
- Member Unite Union
- Consultancy work for Haleon

#### Alisdair Jones

- Employee of Kent Community Health NHS Foundation Trust
- Locum Pharmacist (Various)
- Treasurer, PDA Union
- Member, PCPA
- Partner works for Kent & Medway NHS Partnership Trust

#### Sorbi Khattak

- Sister Doctor Obstetrics and gynecology SpR, PhD
- Sister Doctor Cardiology SpR
- Brother in Law GP & Sports Medicine SpR
- Ambassador Business & Dreams UK/Sweden
- Student PgCert independent prescribing for pharmacists University of Portsmouth
- Honorary Trainee St Mary's Hospital Dermatology. University of Portsmouth Hospitals Trust
- Hourly-paid teaching fellow University of Portsmouth
- Early careers group advisor University College London
- Skincare scientists co-founder (blog and non-profit consultancy)
- Limited company locum/aesthetic pharmacist director Sorbi London Ltd
- Aesthetic pharmacist clinic (future business under SK Medica Ltd)
- BySorbiClinic aesthetic pharmacist clinic (future business under Sorbi London Ltd)
- NovaTalent Member
- PDA indemnity
- Ad-hoc consultancy
- Mentor & in-coming school governor Girls' Day School Trust (GDST)
- Personal Blog(s) ad-hoc (partnerships and non-profit)

#### Geraldine McCaffrey

- Principal Pharmacist at Betsi Cadwaladr University Health Board
- Member of the Delivery Board for Pharmacy: Delivering a Healthier Wales
- Vice Chair, Pharmacy Research Wales Group
- Member, National Pharmacogenomics Group (Wales)
- Member of Unite/Guild of Hospital Pharmacists

• Member of UKCPA

#### Gino Martini

- PHTA Ltd main employer
- GPhC Team Member Accreditation Programme
- Leucillin Advisor stabilised hypochlorous acid provider
- Director, PHTA Ltd
- Director, Lakes Biosciences Ltd
- Director, Lupa Medical Ltd
- Visiting Professor at King's College London, Anglia Ruskin, Reading and Bradford
- Honorary Professor at University of Birmingham
- Court Member of the Worshipful Society if Apothecaries
- was on the working group for the UK Commission for the Profession of Pharmacy

#### Erutase Oputu

- NHS Kent & Medway ICB
- Member of UK Black Pharmacists Association
- Member of UK Clinical Pharmacists Association
- Member of the Guild of Healthcare Pharmacists
- Pharmacy Research UK Trustee
- Knockholt Mansions Residents' Trustee
- Member of Inclusive Pharmacy Practice Advisory Board, NHS England
- Brother works at Astra Zeneca PLC

#### Lynne Smith

- Royal College of Anaesthetics: Lay Member of Anaesthesia Clinical Services Accreditation Team and lay member of committees and groups including the Intercollegiate Advisory Committee in Dentistry
- Health Care Professions Council: lay member of Fitness to Practice Panels
- Volunteer and mentor for schools programme for an international development charity

#### Audrey Thompson

- Member NHSGGC pharmacy practices committee 2024
- Member Scottish Practice Pharmacist and Prescribing Advisers' Leadership Group 2015 2023
- Member of Unite

#### **Cheryl Way**

- International Pharmaceutical Federation
- Guild of Healthcare Pharmacists
- UK Faculty of Clinical Informatics
- Member Pharmacy: Delivering a Healthier Wales Delivery Board
- Digital Health & Care Wales
- Member, Hayes Point Right To Manage Company Board



#### **OPEN BUSINESS**

### Minutes of Assembly Meeting held on 22<sup>nd</sup> November 2023

Present:	Claire Anderson (CA) - Chair, Andrew Carruthers (AC), Ciara Duffy (CD), Brendan Jiang (BJ, Alisdair Jones (AJ), Geraldine McCaffrey (GMc), Gino Martini (GM) Tase Oputu (TO), Lynne Smith (LS), Audrey Thompson (AT), Cheryl Way (CW) – part meeting
In attendance:	Paul Bennett (PB), Karen Baxter (KB), Avril Chester (ACh), Rick Russell (RR), James Davies (JD), Elen Jones (EJ), Laura Wilson (LS), Alison Douglas (AD), Melissa Dear (MD), Liz North (LN), Parastou Donyai (PD), Aman Doll (ADoll) – Item 03 only, Katie Burlison-Rush (KBR) – Items 03 only, Emer Bellis (EB) – Item 03 only, Tony Scully (TS) – Item 03 only, Joseph Oakley (JO) – Item 08 only
Observers:	2 Members attended as Observers

Apologies: Thorrun Govind (TG), Ruth Edwards (RE), Sorbi Khattak (SK)

Item	Paper	Notes and actions	Action by
Item 01 Welcome & Apologies		CA welcomed everyone to the meeting. Apologies were received from Thorrun Govind, Ruth Edwards and Sorbi Khattak.	
Item 02 Items for Noting	23/11/ASB/02	The following items were noted: a) Code of Conduct & Remit of Assembly and COG b) Declarations of interest c) Minutes of the Open Business Assembly Meeting 11 <sup>th</sup> /12 <sup>th</sup> July – noted and approved d) National Pharmacy Board Reports e) President's Report f) Treasurer's Report	

	<ul> <li>g) 2023 Education &amp; Standards Committee Annual Report &amp; minutes of meeting held on 18<sup>th</sup> October</li> <li>h) 2023 Science &amp; Research Committee Annual Report</li> <li>i) 2023 Panel of Fellows Annual Report &amp; to note process for National Honours</li> <li>j) 2023 Membership Committee Annual Report</li> <li>k) 2023 CPA Annual Report</li> <li>l) 2023 Health &amp; Safety Annual Report</li> </ul>	
	m) 2024 Effective Dates <u>n) FIP update</u> o) Inclusion & Diversity update	
	GM noted he was pleased to see the Society's process for National Honours clearly set out and hoped it might lead to more pharmacists being nominated in future.	
23/11/ASB/03a	a) EDI Strategy EB, KBR & ADoll attended the meeting for this item.	
	RR gave a brief summary of the background to the EDI Strategy & Action Plan 2023-2025 and EB then ran through the paper.	
	She explained that the internal staff EDI group had also had sight of the document and had discussed it when it met last week. Members of the group had asked how the team were planning to act on the data it would be collecting and requested that further details on this be provided to them at a future meeting.	
	EB stressed that, as the Society was not a large employer, any actions it might be able to take in this area would inevitably have to be proportionate to its size and within the existing limited resources, but that this did not mean that the team would not be challenging itself – rather that their work would need to be led by the needs of all its employees as a whole, recognising that it would not be possible to focus on every area.	
	LS noted the paper referenced the need to consider undertaking an EQIA impact assessment for certain activities and asked why, if the assessment was relatively easy to complete, there was a need to have to assess whether it was required rather than requiring its completion for all activities. EB replied that the assessment process had already been in place for a while and had been included in the action plan document simply to ensure it was always considered when creating new policies/processes and to increase awareness of it.	
	23/11/ASB/03a	j) 2023 Membership Committee Annual Reportk) 2023 CPA Annual Reportl) 2023 Health & Safety Annual Reportm) 2024 Effective Datesn) FIP updateo) Inclusion & Diversity updateGM noted he was pleased to see the Society's process for National Honours clearly set out and hoped itmight lead to more pharmacists being nominated in future.23/11/ASB/03aa) EDI StrategyEB, KBR & ADoll attended the meeting for this item.RR gave a brief summary of the background to the EDI Strategy & Action Plan 2023-2025 and EB then ran through the paper.She explained that the internal staff EDI group had also had sight of the document and had discussed it when it met last week. Members of the group had asked how the team were planning to act on the data it would be collecting and requested that further details on this be provided to them at a future meeting.EB stressed that, as the Society was not a large employer, any actions it might be able to take in this area would inevitably have to be proportionate to its size and within the existing limited resources, but that this did not mean that the team would not be challenging itself – rather that their work would need to be led by the needs of all its employees as a whole, recognising that it would not be possible to focus on every area.LS noted the paper referenced the need to consider undertaking an EQIA impact assessment for certain activities and asked why, if the assessment was relatively easy to complete, there was a need to have to assess whether it was required rather than requiring its completion for all activities. EB replied that the 

PB added he was very keen that the completion of EQIAs became even more firmly embedded within all teams across the organisation and it became the norm to complete across all areas. TO thanked EB & KBR for producing the strategy which was the most robust report on EDI she had seen since becoming an Assembly member and noted that she had already shared a number of thoughts on the document with them ahead of the meeting today.
She noted that some of the statements in the document were around 'considering' certain things and other items were indicated as optional but felt that the wording for many of these should be firmed up as work evolved. She additionally noted the strategy only covered 2023 – 2025 and asked what the team planned would happen post-2025 and noted she would expect to see a focus on EDI and intention in this area to be clearly set out in the Society's next overarching 5 Year Strategy in 2026.
TO then asked where overall responsibility and accountability for performance against the plan sat within the organisation and would like to see reporting/monitoring of progress on implementing the various aspects of the plan brought back to Assembly on a regular basis going forward.
PB was pleased that TO considered the plan to be robust and explained that he himself took overall responsibility for EDI across the organisation. He had last year delegated this responsibility internally within the Executive team to the CEMO however, since the post holder had left the organisation, responsibility had again reverted back to him directly. He added that all members of the Executive team were fully engaged in this work, a monthly I&D update came to each Exec meeting and Exec members attended the internal EDI meetings on a rotational basis. He assured members that monitoring of work against the plan would be undertaken in the same way as all other work plans and an update would be brought back to each Assembly meeting.
AJ noted that three of the 10 'pillars' listed in the plan involved some form of training around EDI but cautioned against falling into a false sense of security just because staff were undertaking training and stressed it would be important to also monitor its effectiveness.
BJ noted that pillar 10 had an indicator of 'what good would look like' of 'tracking' applications from diverse candidates but questioned whether this was really a good metric to use. He also questioned if women and people of colour were the main areas of focus for the work as there were many different characteristics that could actually be considered. GMC similarly noted that socio-economic diversity cut across many characteristics and would therefore be keen to see the team undertake work in this area in future.

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	EB agreed that 'tracking' was probably not the best description of what should be done and it would therefore be better to state 'demonstrate an improvement'.	
	GMC asked if the team had considered use of the Welsh language in their work. She particularly noted that should EJ, a first language Welsh speaker, leave the organisation the team might struggle to meet its legal requirements within Wales in this area and felt it was therefore important to future-proof in some way against this. EB had not specifically considered this when putting the document together but was aware it was something EJ was looking to consider at some point. EJ noted that the team in the Welsh office did always apply the Welsh language as/when required but agreed that should any future Director for Wales not be a first language Welsh speaker the team might struggle in this regard and will therefore work with EB to incorporate some formal principles to ensure the Society could always be compliant with the Welsh Language Act.	
	<ul> <li>b) PJ User Experience</li> <li>TS joined the meeting for this item. He outlined the background to the item and gave members a live demonstration of the new PJ app.</li> </ul>	
	Members all thought the app was excellent and a great improvement on the previous version.	
	TS was asked if the underlying code for the app had been developed in-house and would therefore need to be maintained by the Society. He informed members that open source code was used which will allow the team to more closely align with the work being done by the Society's main Tech team.	
	Members asked if it was possible to book-mark favourites in the app and then have this link in with an individual's favourites when they logged into PJ via the website. TS thought this should fully sync up across both platforms but would need to check if this was in fact the case.	
	TS was asked if the app had a dark mode. He noted that dark mode was not part of the initial launch version of the app but the team would certainly consider it going forward.	
	Members asked if it was possible for the app to integrate in some way articles read with the revalidation app/cpd records. TS informed them this would technically possible but would be part of on-going work to consider how best to integrate with other membership tools.	
	Members also noted it would be important to ensure there was some way to monitor take-up of the app.	
Item 04 CEO Update	a) RPS Conference PB began by congratulating the team for a hugely successful and positive Conference held earlier in the month. 630 people had attended in person (an increase of ~15% on the previous year), 214 people had joined the event virtually, 111 posters had been presented, 29 exhibitor stands had been present and all	

feedback received to date had been positive with the conference rated either excellent or good. Members had been particularly complimentary about the Prof John Amechie, the key note speaker.
Assembly members all felt the conference had been very successful and congratulated the team. GM added that he had been particularly pleased to see science so well integrated into the conference and to see so many abstracts and posters.
TO felt the record attendance had shown how grateful people were to now be able to come together again and showed a desire for in-person attendance that she hoped could go on to be replicated at smaller events at a more local level.
CD asked how it was decided which sessions would be streamed on-line as she noted not all of them had been. PB noted that some presentations naturally leant themselves better to this but the team worked with the presenters to assess. There was also a capacity issue and limitations as to how many could be streamed but hoped the right balance had been struck and welcomed any further feedback on this outside the meeting.
b) New Society Awards PB was pleased to remind members of the three new awards recently announced by the Society o recognise and celebrate outstanding contributions to the pharmacy field: The Daniel Thomas Award, the OPERA Award, and the Barnett Award
c) Bazier Noted that PhP had now completed the acquisition of the Bazier psychotropic drug directory and content would be available via MedcinesComplete from January 2024.
d) Paracetamol The President has recently issued a statement calling for the ban on multi-buy paracetamol offers.
e) Collaborative Working PB and CA recently attended the UKCPA conference and dinner and the Society has joined forces with them to help enhance Accreditation & Credentialling.
The organisation celebrated Black History Month and hosted a very successful Celebrating our Sisters event coordinated by ADoll.
Teams have been working with Marie Curie to facilitate the roll out of the Daffodil Standards for Community Pharmacy which was a fantastic example of both creating standards then supporting their roll out.

	JD had given evidence in parliament at the Health and Social Care Select Committee's inquiry on pharmacy. EJ had similarly appeared at the Welsh Senedd to speak about helping the profession to reduce its carbon emissions and LW discussed improvements for patient care with the Scottish parliament.
Item 05 Future Professional Leadership	PB noted that the title of the new body had now been announced as the UK Pharmacy Professional Leadership Advisory Board (UKPPLAB). He and CA had met with the four CPhOs, APTUK, PFNI and the pharmacy SPGs to raise concerns about progress on the appointment of a Chair and publication of terms of reference for the Board. The President & CEO had also published a blog outlining these concerns and reflecting the discussion held by Assembly at its meeting in July - this had led to an open letter by the CPhOs being published which stressed the importance of the independence of the Board.
	Sir Hugh Taylor has now been announced as the Board Chair and the Society issued a statement welcoming both his appointment and the announcement of more detail on the composition of the Board, as well as expressing a desire to work constructively and positively with him. PB & CA will be meeting with Sir Hugh next week however PB noted that the Society would not be involved in any way in the appointment of the nine independent experts who would sit on the Board (nor would any of the professional leadership bodies or SPGs) which he felt was regrettable.
	CA, as the RPS representative on the Board, would also be meeting with Sir Hugh and the other representative Board members on 5 <sup>th</sup> December but she noted that the appointed independent experts would not be in place at that time.
Item 06 Constitution & Governance Review	PB provided a recap of the background to the commissioning of the Review and the appointment of Firetail as the independent consultants to undertake the work. He reminded members that, ultimately, any recommendations from Firetail that might be agreed by Assembly but that impacted on the governance of the organisation would be something the wider membership would want to express their views on and that any that might require a change in the Society's Charter would have to be approved by the membership via a Special Resolution vote. He explained that Firetail's recommendations would be grounded in robust evidence and their research
	undertaken with many different stakeholders (eg CPhOs, Board and governance committee Chairs, Assembly Members, past office holders etc) including the recently issued survey of RPS members which had received a good response rate.

		PB stressed the importance of engaging with members, especially elected governance members, before any potential changes could be formally addressed and the team were currently in the process of considering what form this engagement might best take. LS asked how the process of engagement with members might dove-tail with the work of the UKPPLAB. PB stressed the governance review had never been dependent on the work of the Independent Commission and had always been planned to be undertaken at some point but had initially been delayed by the pandemic. Although there was a link to the wish of the IC to provide a horizontal structure for better collaboration across the various pharmacy organisations it was for completely for RPS and its members alone to determine what its organisational structure should be. He noted that Firetail had spent considerable time considering the wider context of the pharmacy landscape, including the changes with Independent Prescribing, the three National Pharmacy Board Visions	
		<ul> <li>and the findings of the Chairs of the Commission on the broader leadership of the profession. Firetail had also been provided with the findings of last year's review of the Society's communications processes undertaken by Luther Pendragon.</li> <li>TO asked if there was anything that might delay the Society reaching where it might need to get to in terms of undertaking the review. PB explained that any timeline was in the Society's own gift but that the review itself was likely to run over the course of the coming year.</li> </ul>	
		Firetail would now be taking the outputs of yesterday's discussions with Assembly away in order to bring back a more detailed proposal to Assembly Members early in 2024.	
Item 07 2024 Election Scheme	23/11/ASB/07	AD introduced the paper accompanying the 2024 Election Scheme which outlined options for re-setting the current imbalance that existed in the number of places for election across the three year election cycle for all three National Boards. She explained that, although all elected Assembly members except BJ were due to come to the end of their Board terms of office in June next year and so would therefore be affected by any decision regarding the 2024 Election Scheme, as any change agreed at the meeting today would be to the potential detriment of these members the conflict of interest that this created had, following a discussion between herself and PB, been deemed to be immaterial and all AMs would therefore be able to discuss and if necessary vote on this item.	

PB noted that the regulations in regard to the National Board elections had been changed a number of times in the last few years because of the pandemic but felt that continuous change in this area was not best practise.	
AJ agreed that change should not be undertaken more than was necessary but did feel now was the time to correct the imbalance, rather than wait for the outcome of the Constitution & Governance Review and any changes to the overall structure that might result from that, as any potential changes would by necessity take a long time to enact. His preference would therefore be to re-set the cycle now in order to build-in greater stability for the Boards rather than have to wait a further three years.	
GMC noted that, although this item had been discussed at the recent National Board Chairs' Forum, she had since realised that the governance review would take a considerable length of time to complete and so would be in favour of re-balancing the terms now rather than waiting. GMC asked how this might affect the maximum three term limit that had been introduced and AD explained that the length of term received upon election would not affect this.	
Members agreed that it was important to help better ensure a degree of continuity every year and CD felt this would also help with knowledge management and retention.	
PB agreed that some degree of organisational memory was helpful but also felt there was a positive side to re-invigorating the composition of the board and bringing fresh eyes to challenges. He felt that a good induction onto the Boards was important to ensure that new members had sight of workstreams that were underway and noted that the team were continually looking at the content for the Induction Days to ensure new comers were helped but added it was important for Board members to also share their advice with incoming members too.	
AJ suggested that in addition to it being productive to have all BMs present for the Induction Day, it might be helpful to those who had been elected for the very first time to have an additional 'on-boarding' session prior to this. EJ noted that the Welsh Board had done this in the summer.	
Members unanimously approved that Option A detailed in the paper be implemented to allow the election cycle to be re-balanced and the appropriate amendments required to the Regulations to be enacted and AD will therefore ensure these are gazetted for the required 60 days [Secretary's Note - the Election Scheme adopted at this time will also be updated accordingly.]	AD
ACTION – AD	AU

Item 08	23/11/ASB/08	a) ESC Recommendation re Faculty Scheme
Any Other Business		JO joined the meeting for this item and members discussed the proposal in the paper from the Education and Standards Committee to close the Society's Faculty Scheme.
		JO explained that the paper had been brought as a recommendation from the Committee following their review of the Scheme against the considerable costs (currently standing at around £12k for each candidate) and the background of Advanced Credentialling which was now in place.
		TO expressed her disappointment at hearing what she felt was an allusion along the lines that RPS doesn't acknowledge the vast experience of pharmacists in non-patient facing roles and the amount of work they do indirectly for patient care and safety, for example as part of an ICB, but may have misinterpreted this. She stressed there was a very strong desire from members in these roles and believed this actually represented a really big gap for the Society in terms of the member value proposition. She noted that there was a huge workforce that would need to be considered who would never take up the Independent Prescribing pathway and was therefore very disappointed to see this proposal coming to the meeting.
		JO stressed that there had not been any intent to imply this but, in fact, the opposite in that because so much of the team's energy was currently focussed on patient facing roles as a requirement of the Assessment and Credentialling work and there was a need to look at a mechanism for recognising other areas of the workforce in the wider sense. However, the existing Faculty scheme wasn't currently being used by this cohort and was, therefore, not felt to be the best mechanism as well as being excessively expensive.
		AC agreed that simply to close the Faculty scheme without having any alternative in place would not be acceptable and would therefore think option 4 in the paper (to close Faculty in 2025 with a 12 month wind-down period) would be preferable.
		BJ however felt that terminating the scheme going forward was not the same as saying Faculty had no value but rather was an acknowledgement that it didn't achieve the initial aims overall and may well have run its course in the current pharmacy landscape which now included Credentialling. The real challenge was therefore how best to widen this or something similar out to non-patient facing members.
		JO advised members that there was a clear distinction between the Society providing 'assurance' (via Assessment & Credentialling) and providing 'recognition' (via Faculty) but did agree there may well be work to be done with NP on how best the Society could better recognise non-patient facing members.
		GMC also expressed disappointed at the proposal and felt Faculty had been neglected over the last few years as there had been no promotion or investment in development of the submission platform which was now extremely difficult to use. She had been under the impression that work was planned to actually

develop the Faculty offer but that this had been delayed due to the pandemic. She did not think it would be possible to fully develop a viable alternative to Faculty by the end of 2024.
AT agreed with members and felt it would be a huge risk to the organisation to close off the scheme without having something else to introduce in its place. She noted that there were currently around 450 highly motivated members of Faculty and closing the scheme would send a poor message as to how they were valued by the Society.
CD agreed it would send a bad message and alienate many members in non-patient facing roles. She asked JO what the alternatives, from a specific Industry perspective, were that were alluded to in the paper.
TO asked if it might be possible to incorporate the Faculty route to Fellowship into some other non- nominated route – JO noted that most other comparable organisations did have some form of portfolio route to Fellowship and that this might be a possibility but would need much more work to be done, particularly in partnership with the Panel of Fellows, as RPS Fellowship at present was much more akin to the National Honours system with potential recipients being nominated without their knowledge.
NP agreed that the team were very keen to develop other routes to Fellowship. He noted that the Society currently ran a Qualified Persons scheme and felt that some learnings from this initiative might be considered in order to help work up a formal alternative. CD however felt that as QPs had a legal standing this was not necessarily a good model to use.
LS noted that if the scheme were to be continued it would clearly have an opportunity cost and asked what the work load implications might be. JO noted that there had always been a will to think creatively in this area but that the small team have by necessity had to prioritise the work on Credentialling. He acknowledged that Assembly members were expressing a preference along the lines of Option 4 but noted that this would come with a resource implication and was not within the team's current work plan. He did however note that budget had been included for 2024 to continue to run the scheme for another year.
AJ agreed the current system was not financially viable but that at present there was no alternative and thought would need to be given as to how this might be resourced. He wondered if Faculty members themselves had been asked what they thought, as well as the wider membership as had been recommended by the LP comms review.
JO would also recommend member input from those in non-patient facing roles as to how they might like to be recognised. Existing Faculty members and those individuals who might currently be on their pathway to completion should also be engaged with.

Date of next meeting		
Item 11	ACTION - JO Assembly Working Day – 26 <sup>th</sup> March, Assembly Meeting – 27 <sup>th</sup> March.	OL
	The ESC would also need to be informed of the decision taken at the meeting today and members felt it was important the Committee were made aware of the strength of feeling expressed by Assembly members. PB noted it had been positive to see Assembly exerting its governance power in this way to fulfil its proper responsibility and was also please that the discussion had been held in open business as part of fulfilling the recommendations of the LP review. He felt the expertise of members of the ESC would be helpful for the team to use as it looked to develop possible alternatives.	OL
	should not be closed until an appropriate alternative was in place. Option 1 in the paper would be pursued for the time being and an alternative would be considered/developed going forward however PB could not commit to this being possible by the March Assembly. ACTION - JO	
	AJ asked members if they were content that the £60k needed to run the scheme in 2024 would also continue. PB acknowledged the potential budget and opportunity costs re looking to develop an alternative however believed Assembly members couldn't really be expected to make an informed decision without much more information. He noted that a business case mechanism already existed whereby additional funding might be provided for in-year workstreams that had not been included in the overall annual budget and it was therefore agreed that a formal business case needed to be created to outline what would be needed in the longer term in terms of a timeline, resources/costs etc. Assembly therefore rejected the recommendation of the Committee and agreed the Faculty Scheme	

### ACTION SHEET – Assembly Meeting 21<sup>st</sup> November 2023

Item	Action	Who by	When
ltem 07	Amendments to Regulations re terms of office for 2024 elections to be gazetted	AD	Immediately
2024 National			
Pharmacy Board			
Elections			
ltem 08	Alternative options to current Faculty Scheme to be produced and provided to Assembly for	JO	Next Assembly
Faculty Scheme	decision		meeting if possible
	ESC to be informed of Assembly decision on future of the Scheme and the reasons behind reaching this decision	OL	Next ESC meeting

## Assembly Meeting 27<sup>th</sup> March 2024

24/03/ASB/02d - Open

Title of item	Update from National Boards
Open, confidential or restricted status	Open
Authors of paper	Elen Jones, James Davies, Laura Wilson
Positions in organisation	Country Directors
E-mail	elen.jones@rpharms.com James.Davies@rpharms.com Laura.Wilson@rpharms.com
Purpose of item	To update Assembly on the work of the National Boards for the period December 2023 – March 2024
Item summary	This paper provides an update on the work of the country teams in relation to policy and advocacy.
Risk register items	n/a
RPS strategy links	All
Actions/decisions required of Assembly	For noting

#### **GB** activity

- A position statement on the separation of prescribing and dispensing for independent prescribers was published, following extensive engagement with members, Expert Advisory Groups, board members and key stakeholders. This has been published in collaboration with the RCN.
- The 2023 Workforce Wellbeing survey report has been published and a second WWB roundtable was held on 29 February. A report of this roundtable is being developed.
- The national boards have set the GB policy priorities for new or updated policy work in 2024, these will be; Artificial intelligence, Digital Capabilities, Medicines Shortages, Palliative Care, Assisted Dying and Gender Incongruence.
- We developed and published a general election manifesto with associated social media activity. We are working with community pharmacy bodies to publish a sector specific manifesto.
- We facilitate and attend regular meetings with pharmacy organisations and professional leadership bodies policy leads to discuss current priorities and consultation responses.
- We continue to support a wide range of media activity including responding to media requests on medicines shortages.
- We supported the reclassification of codeine linctus from P to POM and this has now been achieved.
- We have launched a Medicines Shortages Project which will be formally announced in mid-March.

#### Activity in England

- A report on progress against the Vision for pharmacy in England, one year on, has been published.
- We continue to lobby for the abolition of prescription charges in England and published results following a joint survey with PDA on this topic
- We are providing support to pharmacists in England delivering Pharmacy First. We are in the process of developing an aide memoir to assist appropriate referrals from GP practices
- The team in England continue to work on the development of a repeat prescribing toolkit in partnership with RCGP as part of the National Overprescribing Review recommendations.
- The Health and Social Care Select Committee is continuing its inquiry into Pharmacy and we are providing additional evidence to the inquiry.

#### **Activity in Scotland**

- Laura Wilson appeared at the Health, Social Care and Sport Committee to give evidence as part of their inquiry into Remote and Rural Healthcare in December 2023. Elements of our policy were discussed including the importance of recruitment, retention, protected learning time, pathways to pharmacist training and the need for pharmacy workforce planning in Scotland.
- We co-hosted a Parliamentary Event at Holyrood on Sustainability in Healthcare with RCGP Scotland in December 2023. Sponsored by Gillian MacKay MSP, she spoke of the importance of collaboration to achieve more sustainable healthcare.
- We had an exhibition stand at the Scottish Labour Party conference in Glasgow in February 2024. We spoke with MSPs, councillors, party members and stakeholders from across health and social care on topics such as improving digital tools for

pharmacists; medicines shortages; our Pharmacy 2030 vision and the need for pharmacy workforce planning in Scotland.

 We continue to lobby MSPs and Government Ministers on the urgent need for community pharmacists to have access to shared patient data to support prescribing and other decisions. In February 2024, we received a letter from the Cabinet Secretary for NHS Recovery, Heath and Social Care confirming that, "plans are in place for the introduction of a shared electronic patient record system which community pharmacists will have access to." This is a significant step forward and we are meeting with the Chief Pharmaceutical Officer for Scotland to discuss timescales and the scope of this, looking to ensure that this is read / write access.

#### **Activity in Wales**

- We continue to input into the Primary Care Electronic Prescribing Programme Board which oversees the national rollout of systems across Wales and is progressing at speed.
- Elen Jones spoke at the re-launch of the greener pharmacy primary care framework event for Public Health Wales. This contributes to ongoing policy and advocacy work on environmental sustainability.
- We continue to steer the vision for pharmacy in Wales, Pharmacy; Delivering a healthier Wales. Events have been held across all sectors and work-places to highlight the ambitions in the vision and we have over 160 people signed up as champions for the vision. The sub-groups meet quarterly, as does the delivery board and two matters have been escalated for further work by the Welsh Pharmaceutical Committee, on protected learning time and prescription duration.
- We participated in the Welsh Conservatives convened 'roundtable health event' at the Senedd. The purpose was to offer independent policy and legislative suggestions to assist Russell George MS and the Welsh Conservative Group in the formulation of future policy proposals. These were centred around workforce retention, training, career progression, recruitment, and measures to improve working conditions.
- Two regional engagement events have been held, one in Bangor (North Wales), focused on changes to pharmacy in North Wales and credentialing. The second event was held at Cardiff, RPS Wales office with a focus on immunotherapy and palliative care. These events gave an opportunity to share policy priorities with the wider membership.
- We continue to participate and input into the work of HEIW, in collaboration with other stakeholders, in developing the Foundation Pharmacist 25-26 Curriculum.

#### Consultations

During the period November 2023 to March 2024, we have responded to 11 consultations. These can also be found on our website <u>here</u>

The RPS will be reviewing the following upcoming consultations

- Draft standards for Chief Pharmacists
- PSA good practice guidance documents in support of regulatory reform
- Never Events Framework
- Development of the Mental Health Standards of Care (Wales) Bill
- Draft regulations and statutory guidance for a mandatory licensing scheme for special procedures in Wales

Tase Oputu, Chair, English Pharmacy Board Andrew Carruthers, Chair, Scottish Pharmacy Board Geraldine Mccaffrey, Chair, Welsh Pharmacy Board

### 24/03/ASB/02e - Open

### President's report December 2023 - March 2024

#### **External meetings**

Paul Bennett and I have had regular meetings with David Webb (CPhO, England). We have also attended planning meetings for UK Pharmacy Professional Leadership Advisory Board (UKPPLAB) and had a couple of meetings with Sir Hugh Taylor. I had a very constructive meeting with Ryan Donnelly the chair of the Academy of Pharmaceutical Sciences in Belfast.

I attended the final meeting of the short life working group on clinical academic careers (report now published. (<u>https://www.england.nhs.uk/publication/report-of-a-uk-survey-of-pharmacy-professionals-involvement-in-research/</u>)

I had a meeting with Gisela Abbam, chair of GPhC.

I have attended several planning meetings with Firetail regarding the constitutional and governance review.

I met the chief pharmacist and ICU consultant pharmacist at the John Radcliffe hospital in Oxford and had a tour of their facilities.

#### **Press and Publicity**

With the help of the wonderful press team, I have made numerous comments on a variety of subjects including medicines shortages, smoking cessation, vaping, supervision, codeine linctus, work force wellbeing, differential attainment and measles. I also had a letter published in the Times about the importance of pharmacists having read/write access to patients' health records.

#### **Conferences and external events**

I attended Pharmacy Schools Council. I spoke at the WPB event on credentialling at Bangor university. I was a guest at the Pharmaceutical Forum of Northern Ireland awards dinner in Belfast. I was a participant at the RCGP Planetary Health Summit. I attended the UK Health Alliance on Climate Change dinner at RCP and council of members meeting at RCOG. I attended the emergency summit on time critical medicines organised by Parkinson's UK

#### **Internal meetings**

Internal meetings have included board meetings in Scotland and Wales, as well as joint meetings and EPB. I attended evening meetings of the SBP. I also attended National Board Chairs' Forum, Remuneration Committee, Finance and Investment Committee, Audit and Risk Committee, Education Standards Committee, Science and Research committee and Pharmaceutical Press Board.

I have regular meetings with each of Paul Bennett, Amandeep Doll and the three country directors. Laura Wilson regularly briefs me on FIP work.

I have tried to attend RPS webinars and focus groups wherever possible including those on ABCD, prescribing and wellbeing.

I chaired the International Women's Day event, attended part of the CPhOs fellows meeting at RPS.

Claire Anderson March 2024

### 24/03/ASB/02f- Open

### Treasurer's Report – March 2024

#### Dear colleagues,

This is my March 2024 Treasurer's statement to Assembly and will focus on year end results for 2023, as well as touching on some initial data for 2024. As usual I would like to start by thanking members of the Operations and Finance teams in particular for the excellent work they do in ensuring the organisation runs smoothly and remains a going concern financially. I would also like to thank fellow members of FIC who ably assist in ensuring good financial governance for the Society.

#### **Overview**

It has been nearly six months since my last report, and the economy is starting to show signs of normalisation. Inflation is reducing, markets are performing relatively well. This is not however a time to rest on our laurels. The cost of doing business is still increasing, yet we are still faced with reducing membership numbers – now is the time to be bold. We must find a way to reverse this trend and build our income, while ensuring that membership proves an attractive proposition.

#### **Operating Performance**

RPS ended 2023 with a healthy operating surplus of just over £1.5 million, well above year end budget of £292k, primarily due to lower spending in a variety of areas, as well as the final tranche of income from CPCS.

PhP continued to perform well, generating the largest amount of income for RPS. It ended the year slightly ahead of budget, alongside Education and Membership which delivered a considerable boost in revenue.

The first month of 2024 has proved a successful start, with a higher-than-expected income from PhP.

#### **Projects**

Current project work continues, primarily within PhP. The Janus project remains on budget and updates will follow on this in FIC and Assembly meetings. There are some unbudgeted expenses that were agreed in 2023 and this will show in the 2024 figures.

#### **Investments**

As I alluded to in my last report, the economic climate has dented the value of our investments this year, although the equities market did rally as the year progressed. Our existing holding in Ruffer is responsible for the majority of the losses we suffered, primarily due to their income protection strategies that have so far not paid off as they rely on markets performing less well, for example due to a recession which has so far not materialised in any meaningful way.

However, as part of our investment strategy we have continued to diversify and are moving some of our investments into a different fund run by CCLA made up solely of equities, the performance of which in 2023 has slightly mitigated the loss in Ruffer. Our strategy is to continue to balance our investments to expose us to a more rounded portfolio, and we will continue to regularly review the situation at FIC in order to provide Assembly with any further recommendations.

There are still significant macroeconomic uncertainties at play which have the potential to disrupt the markets and it is important we do not rely too heavily on any one strategy.

### 24/03/ASB/02f- Open

I am pleased to confirm that our investments continue to exclude harmful activities such as fossil fuel extraction, and ESG (environmental, social, and governance) factors continue to play a key part in our decision making and selection of appropriate investments.

#### **Governance**

It is my opinion that FIC is doing a good job holding to account on financial governance, strengthened immeasurably by the addition of two independent experts. Their knowledge and experience have directly contributed to several successes since their appointment, most notably the work around our pension funds which has boosted our financial performance substantially.

#### **RPS Dashboard**

I continue to encourage all members of Assembly, but particularly those who sit on FIC, to use the RPS Dashboard, which provides an updated monthly summary of key financial indicators in a more visual format. I know I speak for members of the whole Operations team when I say that they or I would be happy to offer support with it for new or existing members.

#### **Summary**

In summary, RPS has done very well in 2023 to deliver a strong operating surplus, well beyond budget. There are challenges ahead, and we must continue to address the imbalance in our investment portfolio as well as looking at other ways to safeguard our financial security as an organisation. A similar surplus in 2024 looks unlikely as costs continue to stress our budget, and good control of these costs will be necessary to meet the expectations of this year's budget.

Alisdair Jones March 2024

## **RPS Education & Standards Committee meeting report**

Wednesday 14<sup>th</sup> February 2024, 2pm – 4pm

Venue: Zoom

Attended	Apologies
ESC Board members:	Ruth Edwards (RE)
Anthony Cox (AC)	Philip Newland-Jones (PNJ)
Heather Smith (HS)	Paul Bennett (PB)
Raminder Sihota (RS)	
Amareen Kamboh (AK)	
Matthew Shaw (MS)	
Sally Lau (SL)	
Susan Roberts (SR)	
Fiona Hughes (FH)	
Lynne Smith (LS)	
Charlotte Richardson (CR)	
Debra Roberts (DR)	
RPS Staff members:	
Joseph Oakley (JO)	
Carys Nelson (CN)	
Patsy Edwards (PE)	
Claire Anderson (CA)	
Karen Baxter (KB)	
Rachael Parsons (RP)	

#### 1. Introduction and welcome.

AC welcomed everybody to the meeting and introductions were given.

No matters arising were noted from the last meeting that would not be covered by items on the agenda. Notes were approved as accurate.

#### 2. Review of previous notes & actions tracker.

JO shared an update on the recommendation that ESC made to Assembly to consider the place of Faculty, now that the curricula for each career stage was now in place. Assembly considered the proposal and, whilst agreeing that RPS Faculty needed to evolve from its current form, had asked for a wider consideration of the actions required to properly establish Faculty's place. Assembly have asked for considerations to be brought back to a future Assembly meeting. ESC will be kept abreast of progress.

JO noted that it was originally discussed that RPS would bring a paper to this meeting regarding the future approach to APCL and continuation of individual APCL reviews. However, as SR has recently been made chair of APAP this has been delayed so that a discussion can be had with SR and APAP with a paper to be brought to ESC in its May 2024 meeting.

All committee members will be able to see their term end date in appendix 1 of ENC 1. The RPS have launched the recruitment for members of ESC and APAP as there is vacancies for both committees and this approach will provide a wider range of applicants to suit the vacancies.

**<u>ACTION</u>**: clarification to be added to Terms of Reference regarding members taking an extended period of leave from the committee and the changes that would have on their term length

#### 3. Post-registration foundation assessment infrastructure

PE explained that the A&C team are currently preparing for the first round of post-registration Foundation assessments which will be taking place in April 2024 with a pilot cohort from Scotland.

PE explained how important it is for the RPS to ensure that the assessor pool is as inclusive as possible at this level of practice to maximise engagement and ensure we have sufficient assessors to meet potential demand.

It was clarified that the Foundation Pharmacist Assessment Panel (FPAP) will act as the operational assessment panel for these assessments akin to APAP for advanced. Similarly, FPAP will make operational decisions under the delegated authority of ESC, so only those items that need to be escalated will be considered by ESC.

ESC members commented:

- It would be a good idea to ensure that there is somebody who is within the FPCC assessor pool on FPAP, as it has been useful on other committees to have this perspective.
- Have to be mindful that assessors are not being pulled from advanced and consultant assessment pools as this could have further impact down the line
- Could the RPS go out multi professionally for the competency panels? This would increase engagement from those who are not within the pharmacy world.

JO explained that this would of course be desirable and was the case with CPCCs however, as it was very difficult to get consistent engagement from non-pharmacists, this had to be discontinued so would be risky for the RPS to require at advanced level.

• Do the assessors themselves have to be credentialed?

JO explained that this will be an aim for the future but, as we have nobody who is credentialed at this level currently, this cannot be achieved.

- If there is a suggestion that a prescriber on the panel would be a gold standard, would this be facilitated by the increase of prescribers in the workforce in the coming years. Could this therefore be revisited in the future?
- This is only going to be a concern for the next couple of years until 2026 when all pharmacists will be prescribers after graduating
- It would be good to recommend that 'prescriber' is desirable but not essential at this current stage
- Independent prescribing courses have to have active prescribers assessing, so the candidates will have already had active prescribers involved in their assessment for modular programmes
- The pool for independent prescribers (IP) is currently small, and it doesn't mean that because they are currently an IP that they will be a high-quality assessor.

**<u>ACTION:</u>** A&C team to implement the recommended options for the post-registration foundation assessment infrastructure and FPCC composition.

#### 4. RPS credentialing report 2023

The draft version of the RPS credentialing report 2023 was shared prior to the meeting.

JO shared that this is the first year that the report has included RPS Core Advanced data.

Other key information shown in report:

- First-time pass rates are similar between candidates submitting core advanced and consultant portfolios. There has been a switch from a higher pass rate for males submitting the consultant portfolio to females
- It's important to highlight that there has been a large number of APCL requests which have been received for Core Advanced, this has created a significant amount of additional administrative work.
- All candidates who have not been credentialed for Core Advanced have failed at least domain 5.
- Page 5 of the report outlines qualitive feedback which has been given from panel chairs across both Core Advanced and Consultant.

ESC members comments:

- The generic feedback from panel chairs is useful to see and will be a helpful resource for those who will be submitting in the future
- Some of the highlights from the report could be considered for wider publication

JO asked that committee members would be able to share the report with their networks once it has been publicly released.

#### 5. A&C strategic aims and business plan

JO presented the committee with the A&C team's strategic aims for the next 3 years.

The following questions were given to the committee from this:

- Do you support these seven aims for the directorate over the next three years?
- Do you think some aims are more important than others? Why?
- How can ESC members work effectively with RPS staff, RPS boards & Assembly to achieve these strategic aims?

- How do we work together to ensure continued growth towards a sustainable operational model to justify additional investment and demonstrate ROI to members?
- How should we best communicate these strategic aims externally to provide clarity of our direction to key stakeholders and the profession?

ESC members comments:

- The UK pharmacy leadership advisory board will be starting in March and would be a great opportunity to link in with them as they will be looking at some of the same aims
- We must ask if not the RPS who can lead on this agenda then who else could do it?
- Endorsed by whom? What is meant by a thought leader in this context?

JO added that language is key here, and the RPS want ultimately all of the key pillars and leaders of the profession to be advocating for us within this space.

- There is an issue around pharmacy technicians not being included within the seven aims; however, can understand that we are creating a strategy which shows where the RPS A&C team is at currently and that the RPS's' membership scope is pharmacists.
- In regard to the e-portfolio, it's a great aim to have but concerned regarding the costs to be able to create a great product, is this achievable considering budgetary constraints?

KB added that we currently have an e-portfolio which isn't integrated with other technology used within the organisation, the aim is to have something which is smooth running and we are hearing that there is an appetite within the profession to have this. It is currently being looked into to develop with a wider RPS-wide technology strategy.

• A roadmap for all pharmacists needs to be clear on the language it uses to ensure that it is achievable

JO then presented the committee with the A&C team's 2024 business plan which is broken down into six key areas; BAU assessment delivery, Technology, Workforce policy & thought leadership, Growth & change, Engagement and Membership.

The team is aware that there is many barriers and enablers that will impact the business plan which is being shared.

ESC members comments:

- What is the key message you want to communicate to get people to be interested in credentialing?
- With all the anxieties around prescribing from 2025/2026, it is important to pick the message that you want to go out with first suggest it is couched within the 'new prescriber' narrative as this will resonate most strongly with the profession
- How can you break these activities down so that it is engageable for the wider membership?
- It is great to see the plan on a page, however it is clear that there is a lot going on and does it all need to be shared externally? Can some of it go into the background?
- Pharmacists working within community sectors may feel excluded how do we keep them engaged?
- There will be some people who will say so what? Need to ensure that there is an understanding as to what everything means and the benefits that pharmacists would get from engaging.
- Will there be a marketing campaign to promote this more?
- Pharmacists will want to know what is in it for me? Especially if they are putting large amounts of time and effort into their work, it <u>has</u> to become an established route for the profession
- Has there been any focus groups to get an understanding as to who is not engaging with the RPS currently and what they are actually looking for?

JO added that the membership team currently do focus groups with non-members to get an understanding as to what the barriers for engagement are.

ESC agreed to endorse the strategic direction of the 2024 business plan that the A&C team have produced.

#### ACTION:

5. AOB

No other business was noted.

## Assembly Meeting – 27<sup>th</sup> March 2024

### 24/03/ASB/02h - Open

Title of item	Education, Professional Development and Assessment & Credentialing – June - December 2023 activities update to Assembly
Open, confidential or restricted	Open
Authors of paper	Helen Chang, Associate Director for Education and Professional Development Helen.Chang@rpharms.com
Position in organisation	neich.onang@phams.com
Telephone	Joseph Oakley, Associate Director: Assessment & Credentialing Joseph.Oakley@rpharms.com
E-mail	
Headline summary of paper	Education, Professional Development and Assessment & Credentialing activities report June - December 2023
Purpose of item	This paper is <b>for noting</b> only and will not be discussed at the meeting. Questions can be submitted to the author ahead of the meeting.
Risk implications	n/a
Resource implications	n/a

### Education and Professional Development activities update to Assembly

#### 1. Background

Educational activity for 2023 largely focussed on developing a compelling educational and professional development value proposition to support membership growth in our target segment: pharmacist prescribers. We also focussed on scaling our credentialing activities at the advanced level of practice following the release of the RPS Core Advanced curriculum and preparing for 2024 where we delivered live credentialing assessments across the three levels of post-registration practice.

#### 2. Summary of activity /achievements to date

#### 2.1. Students

- We continued to work closely with NHSE, NES, HEIW and BPSA to co-develop and deliver a series of webinars to support third year MPharm students prepare for the national foundation training recruitment scheme (Oriel) 2023/24. Over 300 students registered for the webinars which focussed on navigating the recruitment process.
- We designed and delivered two workshop sessions in August and September to support and prepare students for the numeracy and Situation Judgement Test assessments which form part of the Oriel process. Sessions were highly valued, with delegates reporting an increase in overall confidence in sitting the assessment as a result of the sessions.

#### 2.2. Foundation training

- September saw the launch our Foundation Trainee membership programme of webinars for the 23/24 Foundation Trainee Pharmacist cohort. The series provides trainees with practical tips and tools to guide them through their training year and beyond. Three interactive webinars were delivered across September, October, and November.
  - Feedback shows that trainee pharmacists would highly recommend the programme of webinars to peers: 97% on average.

Title of webinar	Number of registrations
Key Milestones for the Foundation Training Year: Insights from Designated Supervisors and Training Leads	238
Law & Ethics: The Medicines, Ethics and Practice as an Essential Resource	345
Focus on clinical resources: using SmPCs, PILs, the BNF and resources to support your revision	458

- We commenced planning of our revision course programme in October. Additional sessions have been planned, with a total of 25 Live webinar dates (5 sessions, each repeated five times) due to be delivered over March to May, 2024.
- We showcased our RPS Foundation Trainee membership programme (and membership offer) at three external conferences over July and August.
  - Well Pharmacy Foundation training conference
  - NHS England (SW region) Foundation training conference
  - o Well Pharmacy Newly Qualified Pharmacist conference

We were also exhibitors at the conferences, which paved the way for plenty of engagement with the future pharmacists about how RPS can support their career.

• We continued to develop the NHSE Foundation Trainee Pharmacist E-Portfolio (as part of a contract) and are working with their project team to scope and gather improvements to improve the user experience.

#### 2.3. Mentoring

- We continued to see good engagement on the mentoring platform. At the end of December 2023, we had 2105 registered users on our mentoring platform. 1768 mentees (1543 are active), 603 mentors (474 are active). 2801 mentoring requests were made and 599 marked as already completed. Between June and December, 345 requests were made and 61 relationships were marked as completed. We explored new streams of work with our mentoring advisory group, and will look to expand the scope of the group so that can support us with supervision, and communities of practice.
- We promoted National Mentoring Day and its benefits which created an influx of mentees and mentors signing up to the mentoring platform.

#### 2.4. RPS Live

• In June to December, we developed and delivered 6 webinars

Month	Webinar content	Number of registrations	% Learners who would recommend to a colleague
July	NICE webinar – Multimorbidity and Shared Decision Making	116	100%
October	RPS and NALW webinar: Improving health and wellbeing through social prescribing	61	100%
October	Careers in the Pharmaceutical Industry	91	100%

#### **Prescribing Support Pathway Series:**

October	Passed your prescribing course, what next?	58	100%
November	Building confidence and autonomy in prescribing	86	97%

#### DPP event:

September	Becoming a Designated Prescribing Practitioner	55	100%
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Development continued on 2024 webinars – including NICE series, prescribing support pathway series, careers series.

#### 2.5. Annual conference

The Education Team were responsible for content planning for the Annual Conference Programme. The theme of the conference was 'Working Together: Empowering the Workforce to Transform Patient Care', focusing on how teamwork and collaboration within and beyond pharmacy can drive improvement in the health and wellbeing of society. There were 4 content streams across the day:

• Working with patients as partners

- Working with the wider pharmacy and multidisciplinary team
- Collaborating with global partners
- Collaborating with industry and research partners

There was also an RPS Zone and a Wellbeing Zone which was a collaboration between RPS and Pharmacist Support. Furthermore, there were workshops running throughout the day:

- Credentialing Identifying development needs for RPS Core Advanced Credentialing
- Research How to write a publishable paper
- I&D What does Sense of Belonging mean to you?

June:

- Keynote speaker announced Professor John Amaechi
- Conference programme published and registrations opened
- Call for abstracts and innovative practice examples closed and peer review period began. Record number of submissions with 169 in total.

July:

- Programme development and refinement continued with partner organisations
- Organisations supporting content development include:
  - o APTUK
  - Commonwealth Pharmacists Association
  - Pharmacist Support
  - o UKCPA
  - o BOPA
  - o PCPA
  - CMHP
  - o NPPG
  - o FIP
  - National Association of Link Workers
- Abstract and innovative practice submission authors informed of outcomes
  - 74 abstracts accepted into research zone and scheduled to be published in the International Journal of Pharmacy Practice
    - 10 submissions selected for oral presentation at the conference
  - 87 submissions accepted into the innovation zone

August:

- We continued to work closely with partner organisations on developing the programme.
- All Chairs and most speakers and panellists confirmed
- Finalising all sessions

September & October:

- Continued to work closely with partner organisations on developing the programme.
- Meetings continued with speakers to finalise content for each content stream.
- Programme was finalised all speakers, chairs and sessions confirmed.
- The final speaker and chair briefing packs were sent out.
- Abstracts were formatted and sent to IJPP for publication.

November:

- The annual conference was fully booked with 852 people attending on the day (634 in person and 218 online).
- There were 47 sessions throughout the day with 61 expert speakers across 5 separate content streams.
- 98% of attendees rated it as excellent or very good.
- 70 abstracts were published in IJPP at the end of the month.
- 141 posters were presented across the Research and Innovation Zones (111 in person posters and an additional 30 virtual presenters)

#### 2.6. Advanced and Consultant Practice

#### Core Advanced

- There are currently 1480 users registered onto the Core Advanced e-portfolio
- The submission and assessor area of the Core Advanced e-portfolio was launched in early August 2023.
- The first window for portfolio submissions was on 20<sup>th</sup> August 2023.
- The RPS received **39** advanced pharmacist credentialing submissions in 2023, all of which were first-time candidates as this was the first year of delivering this level of credentialing. The first-time pass rate was **62%**.
- In 2024, the RPS has received Core Advanced portfolio 8 submissions, 7 are currently undergoing assessment through Advanced Pharmacist Competency Committees (APCCs).

#### • Consultant Pharmacist post approval

- In 2023, the RPS received a total of 24 post approval applications, 11 of which have been approved, 7 are provisional and 7 are outstanding outcomes.
- In 2024, the RPS has received 4 post approval applications which are currently being reviewed by post approval panels.

#### • Consultant Pharmacist credentialing

- There are currently 1433 users registered onto the consultant pharmacist eportfolio.
- In 2023, we received a total of 39 portfolios submissions. The first-time pass rate was 52%.
- 7 portfolios were submitted to undergo the credentialing assessment in the 2024/1 assessment diet and are currently undergoing assessment through Consultant Pharmacist Competency Committees (CPCCs).
- Advanced Pharmacist Critical Care and Advanced Pharmacist Mental Health curricula
  - The RPS launched consultations on two new pioneer curricula defining advanced pharmacist practice in critical care and mental health, developed collaboratively with the UK Clinical Pharmacy Association (UKCPA) and College of Mental Health Pharmacy (CMHP) respectively.
  - Both consultations were launched on 14<sup>th</sup> February and will remain open until 12<sup>th</sup> March.
  - Both curricula will be assured through the collaborative assessment of additional specialist clinical outcomes via an add-on module to the RPS core advanced eportfolio. Successful demonstration of these outcomes, in addition to the outcomes in the RPS core advanced curriculum, will result in the awarding of both the RPS core advanced credential and an additional specialist credential. These e-portfolio modules will be launched by September 2024.

#### ROYAL Pharmaceutical Society

### 24/03/ASB/02i - Open

### Agenda for RPS Science and Research Committee

#### Monday 5<sup>th</sup> February 2024, 11.00 – 13.00

Held via MS Teams

#### 1: Recognition

Title	Item 1. Introductions, Apologies, Declarations of Interest and Developments, Chair	Time of item: 11:00	
Description	Introduction to the meeting and matters arising/developme	ents since the last meeting	
Purpose	New Chair to discuss their vision for the SRC To review significant developments since the last meeting Welcome to new members/ introductions		
Outcomes	meeting. A round of introductions were heard from all on the call. No introduce themselves.	<ul> <li>pologies were received from the following people:</li> <li>Cathy Mackenzie</li> <li>Gill Hawksworth</li> <li>Yogini Jani</li> <li>Mark Gilchrist (AmEAG Chair)</li> <li>he Chair welcomed SRC members and outlined the setup and arrangements for the neeting.</li> <li>round of introductions were heard from all on the call. New members were able to stroduce themselves.</li> <li>leeting outcomes from the last meeting were agreed as a correct record and a</li> </ul>	

#### 2: Relevance

Title	Item 2. Science & Research Update, SRT (Parastou) Time of item: 11:30	
Description	An update from the Chief Scientist	
Purpose	<ul> <li>To relay an update on the</li> <li>The OPERA 2024 and Harrison 2024 nomination calls</li> <li>Response to calls and reflections</li> <li>2024 RPS Science and Research Summit (WG?)</li> <li>A new S&amp;R Officer now appointed (0.6 FTE)</li> </ul>	
Outcomes	<ul> <li>Parastou provided an update on OPERA 2024 – https://www.rpharms.com/recognition/rps-honours#opera</li> <li>The deadline has been moved to the 3<sup>rd</sup> week of February, we have had some fantastic nominations – please review criteria and nominate colleagues. Self nominations can also be made.</li> <li>There was a discussion around criteria and age groups.</li> <li>Parastou outlined the current awards criteria.</li> <li>OPERA – early career researcher in pharmacy</li> <li>Harrison Award – goes back almost 100yrs</li> </ul>	

<ul> <li>Harrison – mid career meaning at the height of an outstanding ongoing career</li> </ul>
<ul> <li>Hanbury – established career akin to a lifetime recognition</li> </ul>
It was outlined that as OPERA is a new award this would be evaluated after 3 years and the criteria will be reviewed across this period. It may be possible to also review the older awards however not currently on the SRT workplan. Question -
Perhaps a change in terminology would be preferable – use of the word independence rather than career stage?
ACTION: Parastou requested any comments be sent to her with regards to the award criteria.
A new part time Research Officer has started in SRT – Leah Burton.
Parastou led a discussion on the Science & Research Summits that have previously been held. It would be good to continue with these, need to consider best time.
ACTION: Summit talks to be taken offline – a short life working group could be formed to take discussions forward.
Ideas given:
Day before conference as a potential time for holding the next Summit

Title	Item 3. SRC Working Groups & Projects, Chair & SRT (Amira)	Time of item: 11:45	
Description	SRC to discuss working groups set-up in previous meeting each group's project.	and to begin planning	
Purpose	<ul> <li>SRC should run through the conclusions on the scope, me working groups, as agreed upon at the previous meeting.</li> <li>SRT can update on progress and project initiation docume following projects: <ul> <li>New Medicines, Better Medicines – Position paper</li> <li>Pharmacy Research Communities of Practice (10</li> <li>Medicines via online sources – Campaign to raise dangers (10 min)</li> </ul> </li> </ul>	on progress and project initiation documents created for the s: dicines, Better Medicines – Position paper update (10 min) cy Research Communities of Practice (10 min) es via online sources – Campaign to raise public awareness of (10 min) pups to agree on first project meeting dates to kick-off the work on ve projects.	
	drugs (reference to <u>PJ piece</u> ))	drugs (reference to <u>PJ piece</u> ))	
Outcomes	<ul> <li>Working group success story – Mark Gilchrist (5 min) - Apologies</li> <li>Diane gave an update on the Penicillin allergy campaign pulled together by RPS teams and the Antimicrobial stewardship expert advisory group (AmEAG). Good example on working relationship between EAG and RPS teams.</li> </ul>		
	It reached 130 channels. More details can be found: <u>https://www.rpharms.com/about-us/news/details/millions-mistakenly-think-they-are-allergic-to-penicillin-</u>		
	Discussion on resource and administrative support request – working groups need nelp/ more support from RPS/SRT		
	There is genuine concern on work required and support needed from the working groups.		

SRT to initially define working groups and share objectives with groups to start moving forwards. Happy to take ideas on how to take groups forward.

Christine – research across the profession; In December 2023 working group Co-Chairs held a meeting with SRT to tease out interdependencies and how to move forward. Clarity was sought, can now move forward.

ACTION - all chairs to meet with Chief Scientist/ deputy and Chair SRC?

 An update on Medicines Shortages – James Davies (5 min) (Weight loss drugs (reference to <u>PJ piece</u>))

Changes to be made – what can be done to stop shortages/ they've always occurred what can we do to make it easier? Substitutions etc Lobbying

Early stages of the project – scoping review small working group and a wider external stakeholder group to work on project – for steer.

Some members have expertise on shortages – would like to interview any volunteers. Intro subject and bring onboard expertise.

To email out to SRC to put call out for any volunteers. Watch this space.

Title	Item 4. Interface with Policy/ Guidance (Amira/ Policy Leads)	Time of item: 12:25	
Description	SRC to discuss emerging matters of interest		
Purpose	<ul> <li>CBD products (reference to <u>ACMD report</u>) – Wing</li> </ul>	aloxone - <u>consultation</u> closes at 11:59pm on 6 March 2024 – Policy leads BD products (reference to <u>ACMD report</u> ) – Wing Tang/Amira (WG?) outh vaping (reference to article in <u>The Times</u> ) – Gill Hawksworth. Amira to rovide an update from MHRA.	
Outcomes	<ul> <li>Naloxone -</li> <li>RPS responded to Naloxone consultation back in 2021. Age made available and more readily available. Didn't have to person. New consultation is looking at confirming services. Changing legislation to include other professions, including (homeless charities etc). Training required and how data to RPS are preparing draft, and will bring back to SRT for any CBD – RPS position – Wing provided an update on the 2 r CBD, these have been provisionally archived as they are coused. Refresh hampered due to expertise and workplans. be happy to take forward with safer meds working group.</li> <li>Youth vaping – prescribers pushing more vaping – RPS var Heidi – does the policy require updating on e-cigs? Possib policy however it is good as it stands.</li> <li>Discussion was heard on numerous items relating to this to regulation of prescribers,</li> <li>no vapes are regulated,</li> <li>receiving notification – not medicinal</li> <li>Trading standards are responsible, not MHRA.</li> <li>do still follow Yellow card scheme.</li> </ul>	be labelled for particular providing naloxone. g a network for registration b be collected/ held. y advice. resources RPS have on quite dated and no longer Amira agreed and would aping position. ly could strengthen the	

<ul> <li>Should be looking at research on long term harm of vaping.</li> </ul>
Simon – should wait for Gov response and the review policy as a full re-write will take
time. UK regulatory – watchful eye on topic to review when the time comes.

Item 5. Other matters arising (Amira/Advisory Groups/Wing)	Time of item: 12:40
SRC to discuss emerging matters of interest	
<ul> <li>Deaths from Propranolol – PJ article <u>here</u></li> <li>Deaths from Clozapine (CMHP response <u>here</u>). See some <u>research evidence</u> on misuse of clozapine.</li> <li>Deaths from Cyclizine. Coroner's report <u>here</u>.</li> </ul>	
<ul> <li>Wing discussed the Patient Safety items. HSIB review on propranolol. Pharmacy alert was provided. Anything additional needed – perhaps a good link to the working group?</li> <li>Clozapine - CMHP/ RPS published data during covid – does this require further work within the working group?</li> <li>Cyclizine – went to Community Pharmacy Expert Advisory Group (CPEAG) to discuss. Should it be reclassified P to POM – there was no consensus. Report sales are incredibly uncommon – should trigger further thought with the Pharmacist.</li> </ul>	
	Groups/Wing)         SRC to discuss emerging matters of interest         Deaths from Propranolol – PJ article here         Deaths from Clozapine (CMHP response here). So on misuse of clozapine.         Deaths from Cyclizine. Coroner's report here.         Wing discussed the Patient Safety items. HSIB review on particular was provided. Anything additional needed – perhaps a goor group?         Clozapine - CMHP/ RPS published data during covid – door within the working group?         Cyclizine – went to Community Pharmacy Expert Advisory discuss. Should it be reclassified P to POM – there was not provided.

### 3: Any Other Business

Title	AOB, Chair	Time of item: 12:55
Description	Any other business beyond the agenda for wider discussion	
Purpose	An opportunity for SRC members to raise items for discussion not included in the agenda.	
Outcomes	Amira suggested inviting/ co-opting speakers to SRC meetings in the future.	
	Parastou responded that clarity on what's intended would be good – inviting experts is a good idea. Speak offline. Topics pertinent to the working groups, SRT or SRC.	
	Future meeting dates:	
	SRC meeting 2 : Monday 15 <sup>th</sup> April, 11am – 1pm (virtual)	
	SRC meeting 3 : Wednesday 3 <sup>rd</sup> July, 11am 1pm (virtual)	
	SRC meeting 4 : Thursday 7 <sup>th</sup> November, 11am – 2pm (face to face)	



### Assembly Meeting 27th March 2024

24/03/ASB/02j - Open

Title	Inclusion and Diversity update
Open, confidential or restricted	Open
Author (include email/phone) Position	Amandeep Doll <u>amandeep.doll@rpharms.com</u> 0207 572 2353 Head of Professional Belonging and Engagement
Purpose of item	Inclusion and Diversity update to Assembly to ensure accountability of delivery.
Item Summary	This paper provides an update on Inclusion and Diversity Strategy programme delivery for 2023 Q4, 2024 Q1 and upcoming activity for 2024
Related Risk Register item (where applicable)	<ul> <li>RPS to continue delivering their commitment to the 5-year RPS Inclusion and Diversity strategy</li> <li>Engagement with key stakeholders and pharmacy organisations to create change and long-term commitment to RPS Inclusion and Wellbeing pledge</li> <li>Staff absence and sickness</li> <li>All risks have been mitigated against</li> </ul>
Related RPS Strategy item (where applicable)	All
Actions/decisions required of the Assembly	None

## Inclusion and Diversity Update Background

<u>RPS Improving Inclusion and Diversity across our profession: our strategy for pharmacy</u> 2020 - 2025 was launched in June 2020, with a commitment to improving inclusion, diversity and creating a sense of belonging for the whole profession.

We are committed to continue to deliver against our strategy and ensure there is an improved sense of belonging across the profession. We must have a fair profession where everyone feels they belong for us to best deliver on all our professional responsibilities.

#### Summary of activity to date

# 1. Address Black students' degree awarding and registration assessment attainment gaps

RPS are chairing a working group with partners from across the profession to address the registration assessment differential attainment and Mpharm degree awarding gap experienced by Black pharmacy students and foundation trainees.

Partners in the group are BPSA, GPhC, NHS England, Pharmacy Schools Council, NHS IPP representatives and representatives from Schools of Pharmacy. Following the first meeting in September 2023, a report has been published which sets out the recommendations and actions that will be taken forward by the group to reduce the differential and degree awarding gaps in a meaningful and sustainable way.

To ensure there is correct representation on the working, the UK Black Pharmacist Association have also been invited to be part of the working group.

The working group will meet every 6 months to review the progress made on the actions and recommendations. Smaller task and finish groups will be formed with members from within the profession to support with the delivery of the actions.

Steps are being taken to move forward with the action: Embedding and sustaining change through sharing best practice with the NHS England Workforce Education and Training Pharmacy team in planning the next EDI forum which will be held in Q3.

#### 2. Inclusion and Diversity Programme Review

We are conducting a review of the RPS Inclusion and Diversity programme to determine its impact on the pharmacy workforce and to evaluate how effective the programme has been in meeting its original aims and objectives.

The programme review is being undertaken in 2 workstreams:

- Workstream 1 A literature review is also being conducted, with an aim to share initial result at the RPS conference in November. The profession wide inclusion and diversity survey was open for 3 weeks with 632 responses, the Science & Research team have conducted focus groups to explore in depth individual responses focused on the following themes:
  - What does a sense of belonging mean to you?
  - Us v's Them barriers to engaging with I&D topics
  - Cultural Competence

• Workstream 2 through completion of the <u>Diversity and Inclusion Progression</u> <u>Framework 2.0</u> created by the Royal Academy of Engineering and the British Science Council we will assess how well I&D has been embedded internally across our products and internal governance structures to identify what we are doing well and how we can improve.

An updated Inclusion, Diversity and Equity strategy will be published towards the end of Q2.

#### 3. ABCD Meetings

The following ABCD meetings have been hosted online to discuss two important topics:

- Co-hosted with Aubilities focussing on adult diagnosis of neurodivergence.
- Differential attainment and degree awarding gap, co-hosted with Diane Ashiru-Oredope with members from ACPN and BPSA to bring to life the impacts of the degree awarding gap and registration assessment differential attainment gap. Encouraging members to think about the positive changes they can make in their workplaces.

#### 4. The Architecture of Pharmacies project

The RPS have been invited to be part of a Pharmacy Research UK project commissioned to look at the architecture of community pharmacies. Considering how they can be made more accessible and inviting to members of the public and patients to share their ailments and concerns.

The report is due early this year, also a potential opportunity to host a pop-up exhibition at the RPS London office in the summer.

#### 5. Equality Impact Assessments

Working with the A&C team to undertake EQUIA for the mental health and critical care curriculum. Providing support and chairing the workshops.

#### 6. Drumbeat Events and Celebrations

#### • Transgender Awareness Week

Nathan Burley GHP president has written a blog for us on the importance of trans inclusive healthcare.

#### • Islamophobia Awareness Month (IAM)

To acknowledge IAM we have focused on the theme of #muslimstories, we shared a webinar on Islamophobia and shared official factsheets from BIMA that people can use in their own organisations to promote discussions.

#### • International Men's Day

This year's IMD theme is male suicide, we have shared previous discussions from South Asian Heritage Month on the importance of discussing mental health, particularly for men. We are also sharing resources from Pharmacist Support to support men in the profession.

#### • World HIV Day

For World Aids Day, we shared a blog about the transformative potential of preexposure prophylaxis by Debbie Laycock, Head of Policy at Terrence Higgins Trust.

#### • Disability History Month

Throughout December we have shared blogs, live streams and webinars to raise awareness across Disability History Month, as well as dedicating the December ABCD meeting to focus on neurodivergence.

#### • International Day of Women and Girls in Science Panel

A panel session was hosted with Parastou Donyai, Diane Ashiru-Oredope and Ciara Marie Duffy to highlight the different scientific roles pharmacists can undertake and to share key resources for people considering moving into more science based roles.

#### • LGBT+ History Month

Sharing stories and resources on how we can support LGBT+ members of the profession.

#### • Race Equality Week

As part of the launch of the differential attainment report, we shared blogs from Diane Ashiru-Oredope and ACPN members Tase on the importance of achieving race equality in the profession.

#### 7. Upcoming activity

In addition to the work being worked on and continuing into Q2 and Q3 highlighted above, the following activities are also being undertaken.

#### NHS England LGBT Health Conference

Joseph and myself will be presenting at the LGBT Health conference on making the RPS curricula inclusive with the EQUIA in March.

#### International Women's Day Event

We will be co-hosting a IWD event in the London office at the London RPS offices, the agenda includes a workshop hosted by the Female Pharmacy Leaders Network and a panel session. Followed by an opportunity to network with peers.

**Planning for future drumbeat events –** meeting with GHP, Female Pharmacy Leaders Network, Pharmacy Technicians of Colour, UKBPA, BPSA and APTUK we will build a calendar of events focusing on inclusion and diversity for the rest of the year.

### ROYAL Pharmaceutical Society

### Assembly Meeting 27<sup>th</sup> March 2024

#### 24/03/ASB/02k - Open

#### 2024 Events Calendar

This year the Events Team will focus on delivering more face to face, revenue generating, high quality events to support membership. In addition to this we will also continue to deliver a series of topical webinars across the year.

To highlight the membership value, all our events and webinars will now be available to non-members at a significantly higher cost. For example, our webinars are free of charge for RPS members, but non-member fee is £75.

We are working closely with colleagues across the business and with the Education Team on content development.

Confirmed Events	Date and Location	Notes
International Women's Day –	Wednesday 6 March, London	Under I&D umbrella, free to
Inspire inclusion		attend for members and non-
		members, delivered in
		collaboration with multiple
		external organisations.
Foundation Programme	31 online sessions between	Now part of the membership
	Monday 10 March and	offer for Foundation
	Thursday 20 June	Pharmacists.
Tabletting Technology Course	Monday 15 April – Wednesday	High-end course aimed at
	17 April, London	industry and academia.
Joint Professional Bodies QP	Wednesday 15 May, London	Event delivered in collaboration
Symposium		with Royal Society of Biology
		and Royal Society of
		Chemistry, aimed at QPs.
17th Annual Fellows Dinner	Thursday 16 May, London	Member Engagement
BPSA Induction Conference	June-July, London	To support BPSA relationship
Demystifying Oriel Workshops	Online, Tuesday 10 September	Supports with career next
	and Tuesday 17 September	steps.
Welsh Conference	Thursday 19 September,	Regional Conference, free for
	Cardiff	members and charged for non-
Designed Awards Coremonies	Ediaburgh 10 Contombor	members.
Regional Awards Ceremonies	Edinburgh, 19 September	Member engagement regional events to celebrate the
	(following the conference)	
	Cardiff, 19 September	profession. We will be
	Bath, TBC	welcoming Newly Qualified
	Nottingham, TBC	Pharmacists to the profession,
	Newcastle, TBC	celebrating great achievements
	London, 8 November (following	of New Fellows, and
	the Annual Conference)	congratulating members who
		embarked on the Credentialing
RPS Annual Conference	Friday 8 November, Hybrid,	Journey. Flagship National Conference
	London	
In the planning stage		
Becoming a DPP	Online, June	Waiting for speaker availability.

#### Key dates to note:

Careers in Industry	London, June	Discovery stage, possible collaboration with Drug Safety Research Unit.
Becoming a DPP	In-person, London, early October	Waiting for speaker availability.
Workforce Summit	September, London	An event open for delegates that are going through credentialing process
Homecare Guidance	September, London	Early discovery stage

#### Full event and webinars calendar

Month	Start Date & Ti	Name	Online/In pers
3	Sun, 10 Mar	Mother's Day	N/A
3	Mon, 11 Mar	Foundation Revision Programme	Online
3	Mon, 11 Mar, 06:3	Foundation: Cardiovascular System and Nervous Syste	Online
3	Wed, 13 Mar, 02:0	Improving patient safety and system efficiency: RPS/ R	Online
3	Wed, 13 Mar, 06:3	Foundation: Endocrine System and Infections	Online
3	Thu, 14 Mar, 07:0	Workforce Wellbeing Action Group	Online
3	Sun, 17 Mar, 09:3	Foundation: Calculations	Online
3	Mon, 18 Mar, 06:3	Foundation: Law and Ethics	Online
3	Tue, 19 Mar, 02:0	RPG - 'Medicines in Paris' virtual tour	Online
3	Tue, 19 Mar, 07:0	NICE - hold	Online
3	Tue, 19 Mar, 07:0	NICE - hold	Online
3	Wed, 20 Mar, 06:	Foundation: Minor Ailments and Common Conditions	Online
3	Tue, 26 Mar, 06:3	Exploring pharmacy careers and opportunities	Online
3	Wed, 27 Mar, 09:	Assembly Meeting	Online
3	Wed, 27 Mar, 01:0	Post-Registration Part 3	Online

Month	Start Date & Ti	Name	Online/In pers
4	Thu, 4 Apr, 07:00	NICE - hold	Online
4	Sun, 7 Apr	World Health Day	N/A
4	Sun, 7 Apr, 09:30	Foundation: Cardiovascular System and Nervous Syste	Online
4	Mon, 8 Apr, 06:3	Foundation: Calculations	Online
4	Tue, 9 Apr	Eid al-Fitr	N/A
4	Tue, 9 Apr, 06:30	Foundation: Endocrine System and Infections	Online
4	Wed, 10 Apr, 06:3	Foundation: Law and Ethics	Online
4	Sun, 14 Apr, 05:3	Foundation: Minor Ailments and Common Conditions	Online
4	Mon, 15 Apr, 09:0	Tabletting Technology Course	
4	Tue, 16 Apr, 07:0	NICE - Hold	
4	Tue, 16 Apr, 07:0	Policy Team - Medicines Shortages Policy Onli	
4	Wed, 17 Apr, 09:0	HOLDING DATE: Royal College joint webinar series	Online
4	Wed, 17 Apr, 07:0	ABCD Meeting	Online
4	Mon, 22 Apr	Passover	N/A
4	Mon, 22 Apr, 06:3	Foundation: Calculations	Online
4	Tue, 23 Apr, 07:0	NICE- Hold	
4	Wed, 24 Apr, 06:	Foundation: Law and Ethics	Online
4	Thu, 25 Apr, 07:0	Policy Team - Medicines Shortages Policy	Online

Month	Start Date & Ti	Name	Online/In pers
4	Sun, 28 Apr, 05:3	Foundation: Endocrine System and Infections	Online
4	Mon, 29 Apr, 06:3	Foundation: Minor Ailments and Common Conditions	Online
5	Wed, 1 May, 06:3	Foundation: Cardiovascular System and Nervous Syste	Online
5	Mon, 6 May	Early May Bank Holiday	N/A
5	Wed, 8 May, 09:0	HOLDING DATE: Royal College joint webinar series	Online
5	Fri, 10 May	Clinical Pharmacy Congress (CPC)	In-person
5	Mon, 13 May, 06:	Foundation: Cardiovascular System and Nervous Syste	Online
5	Wed, 15 May, 09:	QP Symposium	In-person
5	Wed, 15 May, 06:	Foundation: Endocrine System and Infections	Online
5	Thu, 16 May, 06:0	Fellows Dinner In-p	
5	Sun, 19 May, 05:3	Foundation: Law and Ethics Or	
5	Mon, 20 May, 06:	Foundation: Calculations	Online
5	Tue, 21 May, 07:0	Primary Care Pharmacy Expert Advisory Group	Online
5	Wed, 22 May, 06:	Foundation: Minor Ailments and Common Conditions	Online
5	Thu, 23 May, 09:0	HOLDING DATE: Royal College joint webinar series Online	
5	Mon, 27 May	May Bank Holiday	N/A
5	Mon, 27 May	School holiday - Half term (England & Wales)	N/A
5	Wed, 29 May	Foundation mock assessment open	Online

Month	Start Date & Ti	Name	Online/In pers.
5	Wed, 29 May	Foundation mock assessment open	Online
5	Wed, 29 May, 06:	Foundation: Law and Ethics	Online
6	Sun, 2 Jun, 09:30	Foundation: Minor Ailments and Common Conditions	Online
6	Mon, 3 Jun, 09:0	Becoming a DPP	
6	Mon, 3 Jun, 06:30	Foundation: Cardiovascular System and Nervous Syste	Online
6	Wed, 5 Jun, 06:3	Foundation: Endocrine System and Infections	Online
6	Wed, 5 Jun, 06:3	Joint Oriel webinar (process)	Online
6	Thu, 6 Jun	All staff day	In-person
6	Thu, 6 Jun, 09:00	HOLDING DATE: Royal College joint webinar series	
6	Sun, 9 Jun, 05:30	Foundation: Calculations	
6	Wed, 12 Jun, 07:0	ABCD Meeting On	
6	Sun, 16 Jun	Father's Day	
6	Mon, 17 Jun	Scotland Conference	In-person
6	Mon, 17 Jun, 06:3	Foundation: Mock Feedback Part 1	Online
6	Tue, 18 Jun, 06:3	Foundation: Mock Feedback Part 2	
6	Wed, 19 Jun	National Pharmacy Board Meeting	In-person
6	Wed, 19 Jun, 06:3	Foundation: Mock Feedback Part 1	Online
6	Thu, 20 Jun, 09:0	Foundation: Mock Feedback Part 2	Online

Month	Start Date & Ti	Name	Online/In pers
6	Fri, 21 Jun, 06:30	Foundation: Mock Feedback Part 1	Online
6	Wed, 26 Jun, 09:	HOLDING DATE: Royal College joint webinar series	Online
7	Mon, 1 Jul	School holiday: Summer break (Scotland)	N/A
7	Tue, 2 Jul, 06:30	Careers in Portfolio	Online
7	Wed, 17 Jul	Assembly Meeting	
7	Wed, 17 Jul, 02:0	Joint Oriel webinar (preferencing)	Online
7	Mon, 29 Jul	School holiday: Summer break (England & Wales)	N/A
8	Mon, 5 Aug	Bank holiday (Scotland)	N/A
8	Mon, 26 Aug	August Bank Holiday (England & Wales)	N/A
9	Mon, 2 Sep	Welcome to the profession - England (Nottingham)	In-person
9	Mon, 2 Sep	Welcome to the profession - England (Bath)	In-person
9	Mon, 2 Sep	Welcome to the profession - England (Manchester)	In-person
9	Mon, 2 Sep	Welcome to the profession - Scotland	In-person
4	Tue, 3 Sep, 09:00	Workforce Summit ( Credentaling summit)	
8	Mon, 9 Sep, 09:0	Homecare event	In-person
8	Tue, 10 Sep, 02:0	Oriel Workshop	Online
9	Tue, 10 Sep, 07:0	Primary Care Pharmacy Expert Advisory Group	Online
9	Wed, 11 Sep, 07:0	ABCD Meeting	Online
9	Mon, 16 Sep, 09:	Becoming a DPP	In-person

Month	Start Date & Ti	Name	Online/In pers
9	Tue, 17 Sep	World Patient Safety Day	N/A
8	Tue, 17 Sep, 10:0	Oriel Workshop	Online
9	Wed, 18 Sep, 07:	Workforce Wellbeing Action Group	Online
9	Thu, 19 Sep	Welsh Pharmacy Board Meeting	
9	Thu, 19 Sep	Scottish Pharmacy Board Meeting	
7	Thu, 19 Sep, 09:0	Wales Conference	In-person
9	Thu, 19 Sep, 09:0	Welcome to the profession - Wales	In-person
10	Mon, 7 Oct	Wellbeing event	
10	Thu, 10 Oct	World Mental Health Day	
10	Sun, 13 Oct	Pharmacy Show In-p	
10	Mon, 14 Oct	School holiday: Half term (Scotland)	
10	Wed, 16 Oct, 07:0	ABCD Meeting On	
10	Mon, 28 Oct	School holiday: Half term (England & Wales)	N/A
10	Thu, 31 Oct	Diwali	N/A
11	Fri, 1 Nov	Clinical Pharmacy Congress North (CPC)	
11	Thu, 7 Nov	National Pharmacy Board Meeting	
11	Fri, 8 Nov, 09:00	Annual Conference	Hybrid
9	Fri, 8 Nov, 09:00	Welcome to the profession - (Awards ceremony includi	In-person

### Assembly Meeting 27<sup>th</sup> March 2024

### 24/03/ASB/05 – Confidential

Title	Luther Pendragon Review – response and action plan
Open, confidential or restricted	Open
Author (include email/phone)	Liz North Liz.north@rpharms.com
Position	Head of Strategic Communications
Director responsible	Paul Bennett
Purpose of item (for noting/discussion/ decision/approval)	For noting and discussion
Item Summary	To receive an update on plans to implement recommendations
Related Risk Register item (where applicable)	n/a
Related RPS Strategy item (where applicable)	n/a
Actions/decisions required of the Assembly	To note

#### Luther pendragon review – update for Assembly

In April 2022 RPS committed to an independent review of member participation and RPS communications following concerns raised by members and elected members about communications, engagement and how the decisions the organisation takes on behalf of the profession through its governance boards are made.

Respected public affairs and communications agency Luther Pendragon was tasked with examining the extent to which RPS members, elected members and stakeholders feel engaged, informed, and empowered to influence decisions about RPS policy and the extent to which they understand why decisions around organisational policy have been taken on their behalf by elected members.

Luther undertook extensive research to inform the review including desk research, surveys, focus groups and interviews with elected members and key external stakeholders to build a detailed understanding of views, on which to base a series of recommendations for the RPS.

The Luther Pendragon review '*Engaging members informing stakeholders'* was published in October 2022 and members were invited to join a presentation by RPS President Claire Anderson at which the review was unveiled. The review was subsequently published on the RPS website.

The review set four principles which would underpin recommendations for improvements to communications and engagement:

- Take a proactive and considered approach
- Be more open and transparent
- o Build member equity and agency
- Focus on collaboration and be visible.

#### Delivering on the recommendations:

Following the delivery and publication of the report we responded in an ad hoc way but recognised a more systematic approach would be needed and that the appointment of a Head of Strategic Communication would enable this ambition.

We have taken three key themes from the report and have created and factored these into our thinking and delivery as follows:

**Communications:** The communications recommendations in the report inform our intention to move to a more proactive and planned approach to communications and are at the heart of the strategic communication plan currently being developed.

**Member engagement:** member engagement issues and recommended mitigations were outlined in the report and will inform our plans (to be delivered in Q2) to formalise our approach to member engagement. Meanwhile a collaborative approach to gathering member insight is and will remain a key element in our advocacy and influencing activity.

**Governance and decision-making:** The review identified the pivotal role that improving a currently complex governance structure will play – and the recommendations that we review and improve this structure have been incorporated into the Constitution and Governance (C&G) review.

A summary of communications and member engagement activity so far is captured in the grid that forms part of this paper, while improvements to governance and decision-making will be delivered as part of the C&G review programme.

The recommendations of the report will require commitment and focus to deliver; we expect to revisit this work over the coming year to ensure we are continuing to deliver on the recommendations and we will update Assembly accordingly.

# Luther Pendragon review – action and proposed actions against recommendations: March 2024

Strategic principles	Communications and engagement Recommendations summary	Communications and engagement actions and improvements summary
Principle 1:	• Communications should be more proactive, identifying and considering the decisions likely to impact members and communicating these effectively.	• Communications: we are moving towards a proactive and planned approach to communications and with the appointment of the Head of Strategic Communications now in post a strategic communications plan is being developed.
Take a proactive and considered approach	<ul> <li>Improve communications and engagement with Assembly and Boards re decision-making.</li> </ul>	<ul> <li>Improvements to communications and engagement with and between Assembly and Boards re decision-making are already underway and we will continue to review and make changes and will report back to Assembly as to impact.</li> </ul>
	<ul> <li>Build on RPS press office function strengths and move more proactive approach over time.</li> </ul>	<ul> <li>Press office – continue to build and improve and to focus on a GB approach to planning, response to key issues and campaigns (eg medicine shortages project).</li> </ul>
	• Be more explicit about the organisation's purpose and function.	<ul> <li>Setting out the organisation's purpose and function is integral to the evolving strategic approach to communications and will be built into the strategic communication plan.</li> </ul>
<b>Principle 2:</b> Be more open	<ul> <li>Communicate more clearly and transparently with stakeholders.</li> </ul>	<ul> <li>Improvements to communications overall will drive clarity, transparency and reputation with stakeholders. Clear stakeholder mapping for key communications campaigns (eg Medicines shortages)</li> </ul>
and transparent	• Ensure elected Board members are informed effectively about decisions made in Assembly.	<ul> <li>A summary of assembly meetings is now published for members and the board. Set and meet expectations for effective communications with Board members and revisit to ensure continuing effectiveness.</li> </ul>
	• Demonstrate confident leadership of the profession.	<ul> <li>Increase thought leadership work and strategic communications activity (build into strategic communications plan).</li> <li>Prioritise and take every opportunity to demonstrate the PLB's confidence and effectiveness in its leadership of the profession</li> </ul>
	<ul> <li>Continue and build credibility and influence in shaping policy.</li> </ul>	• We will continue to ensure that we report back to members on the impact of their taking part in or being involved in policy and influencing consultations and other work.
	Foster greater engagement	• Engagement strategy being developed. Work by engagement team and membership team along with other teams is moving this agenda forward.
Principle 3: Build member equity and agency	• Demonstrate how decisions and effort is equitable across stakeholder groups.	<ul> <li>Equitable structure - The outcomes of the C&amp;G review provide an opportunity to resolve or mitigate this concern</li> <li>Proactive communications post Assembly and Country Board meetings together with supported and effective onboarding for new elected members. Board induction prioritised for June.</li> </ul>
	<ul> <li>Wherever possible allow members and elected members to participate in decisions being made.</li> </ul>	<ul> <li>Provide and promote opportunities for members to participate and contribute to decision-making and policy work eg supervision consultation, medicines shortages webinars</li> </ul>
Principle 4: Focus on collaboration and be visible	<ul> <li>Increase levels of collaborative engagement that acknowledges and validates member insight</li> <li>Increase opportunities for member interaction and facilitate dialogue at eg f2f, online and round table events.</li> </ul>	<ul> <li>There are multiple examples of where we are already collaborating and engaging (eg supervision consultation, Workforce Wellbeing and medicine shortages) – but we need to ensure that these are promoted to stakeholders to drive participation across countries and GB - and that we then close the loop by communicating to all members about the activity and thanking participants effectively.</li> </ul>
	<ul> <li>Collaborate visibly on advocacy and thought leadership work to gather insight, build understanding and demonstrate respect for member views.</li> </ul>	<ul> <li>We need to showcase and communicate the advocacy collaboration that is already underway but we can also do more and ensure that we 'play back' this work via member comms.</li> </ul>