



Public consultation report on the draft PSI Corporate Strategy 2018-2020

May 2017

Introduction

The PSI's current Corporate Strategy for 2013-2017 is coming to an end and since late 2016 we have been developing our next Strategy, which will set out what we, as the pharmacy regulator, want to achieve in the years ahead.

Having carried out a review of the work we have done in recent years, and assessing our environment and needs for the future with the assistance of internal engagement with PSI Council and staff, we then conducted a public consultation on a draft Corporate Strategy 2018-2020 during April 2017. This consultation was to consider stakeholder expectations and to inform our work over the next three years.

The draft Strategy consultation document proposed four key strategic areas, and an overview of activities, so we can meet our core responsibilities in the next few years. It also demonstrated how we will develop our organisation and its resources so that we can carry out our work efficiently and effectively. The overall aim is to work towards safer pharmacy practice through effective regulation by the end of 2020. These key themes and objectives reflected both an external and internal development context, our founding legislation, organisation values, the PSI's mission and vision, and seeks to align with the Department of Health's strategy and the current Programme for Government.

About the Consultation

The public consultation on the draft Strategy was opened on 11 April 2017 for three weeks. The consultation document (Appendix 1) containing the draft Strategy was made available on the PSI website, with emails circulated inviting feedback from all PSI registrants and a wide variety of other stakeholders including patient and public advocacy organisations, regulators, health providers, policy makers etc. Feedback was invited either through an online consultation survey, by email or by post.

Response to the Consultation

In total 39 responses were received to the public consultation.

- 25 were received through the online consultation survey, which asked 5 key questions on aspects of the proposed strategy. Not all survey respondents answered every question.
- 14 email responses were received.

The number of responses is a small representation of all those invited to comment on the strategy. However, we see it as a useful exercise with general agreement to the main areas

proposed under the Strategy for the coming years. All feedback has been considered in the development of the Strategy with the PSI’s Council and staff.

A profile of respondents and the names of organisations that responded are listed at the end of this document.

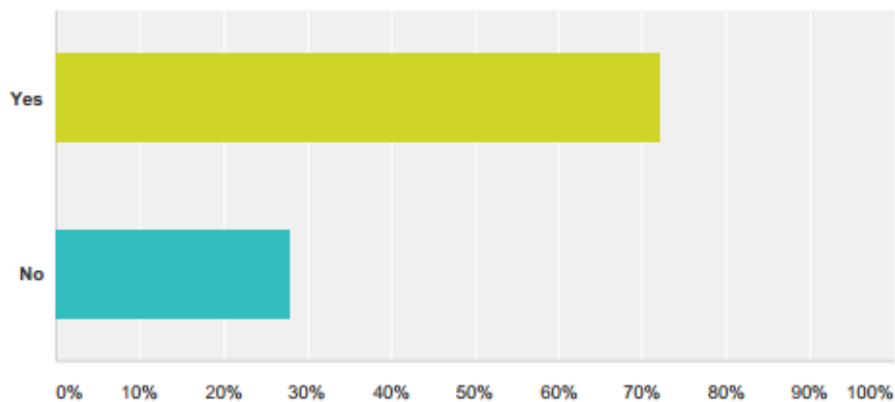
The PSI would like to thank all who took the time to provide submissions to the consultation.

Results

This report summarises the feedback received and the themes identified during the consultation process. It includes the outcome of the online survey and key themes arising in both the email and survey responses.

Q1. Do you think that the draft Corporate Strategy accurately aligns with the PSI’s role and responsibilities? (Answered by 25 in the survey)

Of those who responded to the consultation survey, the majority agree that the draft is aligning with our role and responsibilities. Several of the email submissions also indicated that the Strategy is broadly aligning with the PSI’s role and responsibilities.



Answer Choices	Responses	
Yes	72.00%	18
No	28.00%	7
Total		25

Of those who responded ‘yes’ comments of general agreement and support were provided (‘Very easy to follow and informative’), with one respondent also saying that ‘there is a need to

ensure that the patient and public are central to EVERYTHING the PSI does and this isn't adequately reflected in the document. The PSI, like the profession it regulates, exists only to serve the public interest'.

Of the seven people who answered 'no' to this question, three provided comments, including reference to the lack of inclusion of pharmacy technicians in the Corporate Strategy and that no specific mention had been given to hospital or industrial pharmacists.

PSI Response

We have noted all responses with thanks. We have considered the feedback and comments in the next stage of development of the final Strategy.

Our commitment to ensure public safety is provided for under legislation and directs our responsibility to register and regulate pharmacists, pharmacies and pharmaceutical assistants. That commitment is central to everything that will be included in the work we intend to carry out in the lifetime of the next strategy. The Strategy does not focus on any one pharmacy practice area, but in line with our responsibility and the work areas for development, we will continue to focus our efforts on the necessary areas so that we are carrying out our role effectively, and in doing that we will engage with registrants and other stakeholders.

Q2. Do you agree with the four strategic areas that are proposed in the draft Corporate Strategy? (Answered by 24, skipped by 1 in the survey)

The majority of respondents agreed with the four Strategy areas proposed. Greatest disagreement was in the areas of Enhanced Regulatory Strategy, followed by Safer Practice and Quality Services. Two respondents disagreed with all four of the proposed Strategy areas. Others disagreed with no more than two or less of the Strategy areas.

	Agree	Disagree	Total
Safer practice and quality services	87.50% 21	12.50% 3	24
Enhanced regulatory strategy	75.00% 18	25.00% 6	24
Organisational excellence	91.67% 22	8.33% 2	24
Increased collaboration and engagement	91.67% 22	8.33% 2	24

Additional survey and email comments provide further viewpoints on the four Strategy areas:

Safer Practice and Quality Services:

There was variety of comments and feedback under this heading. Three respondents questioned the choice of the word 'safer', and while one person acknowledged that there is always room for improvement, there is concern at the implication that current practice is not safe, or that the baseline is unsafe. Referring to the central organisation priority, another person commented that it 'ignores the fact that safe practice is a CULTURE that can only be achieved by the commitment of practitioners and CANNOT be enforced by regulation, regardless of how effective it might be.'

Mention was otherwise given to ensuring that the recommendations of the Future Pharmacy Practice Report is included to 'provide a framework for the evolution of the practice of pharmacy in Ireland including safer practice and enhanced pharmacy services'. While another submission outlined that it would be 'good to see greater emphasis on polypharmacy and medicines optimization', and referenced changes related to PSI registration— the need for an 'inactive' PSI Pharmacist Register with CPD exemption, the need to reduce fee burden, and offer a reduced fee for retired pharmacists wishing to remain registered.

There was feedback also to an oversight in phrasing that refers to treatment and care being provided only in a pharmacy, as opposed to ensuring that any wording covers the care and services that may be provided by a pharmacist outside of the physical pharmacy, as may be the case.

Collaboration and Engagement:

Several submissions focused on a request to engage more with hospital pharmacists, or the level of involvement and regulation of hospital pharmacists/pharmacies by the PSI and lack of clarity in this regard. There were several references to the 2013-2017 PSI Corporate Strategy that included objectives particularly relevant to hospital pharmacy. There was also feedback relating to improving communication with all PSI registrants, especially around the registration process.

There were comments made on the theme of ensuring that the PSI has an adequate understanding of those it regulates and the pharmacy environment at the coalface, the perceived lack of concern for pharmacists' welfare, work environment and pressures, and with two respondents relating this back to how the PSI plans to develop its own staff and working environment. One respondent proposed whether it would be useful over the course of the Strategy to give attention to the employment experience of pharmacists and consider what risks might be associated with locum pharmacists, pharmacists trained outside of Ireland, and whether further supports need to be provided to them.

Also, feedback was received on the need for the PSI to ensure continued, effective cross-regulatory/ policy-maker engagement for clarity in the implementation of new legislation, in

relation to costs borne by professionals regarding new services, and to ensure working towards a people-centred health service.

Enhanced Regulatory Strategy:

Again, reference was made to the regulation of hospital and industry-based pharmacists and their lack of specific mention in the Strategy. Some respondents felt there was lack of focus in the Strategy on the pharmacy owner and their responsibility, and the need to ensure any regulatory developments are less bureaucratic and focus instead on outcomes for patients, allowing practice flexibility and continued innovation.

Organisational Excellence:

Two respondents queried the strategic focus on the PSI as an organisation, and on staff and resource development, where such focus should also be provided to the profession and the environment in which pharmacists operate. Other submissions remarked on this Strategy area as being useful in driving efficiency, which should have external impact and potential for fee reductions for registrants.

PSI Response

All feedback is noted with thanks, and the comments and concerns raised have been considered. As the final Strategy document will note, like any overarching Strategy that sets the development potential and the direction for the organisation over three years, it must be sufficiently high-level. The Strategy will be accompanied by an implementation plan for the organisation over the three years; this will include detail of the tasks we will carry out. This document will be the basis for the PSI Council to monitor progress, and will be used by the PSI's staff to set shorter term goals.

We are mindful of the pressures of the pharmacy working environment, and the Strategy places a focus on progressing a regulatory approach that is proportionate and considers evolving practice. We will examine how we can inform and support pharmacists and pharmacy owners in their respective roles, ensuring a focus on the statutory and governance responsibilities that exist, and being mindful of the number of new pharmacists registering each year with the PSI. Each activity we undertake will focus on the overall benefit, and health and safety outcomes for patients.

We have particularly included organisational development in the Strategy because our next Strategy plans to be an ambitious one that will benefit from some extensive process changes within the PSI, and the right type and level of investment in our people and resources, so that there is ultimate benefit and cost savings that can impact those beyond the organisation.

Q3. Do you have any comments on the activities proposed under each strategic objective? Please state the strategic area you are referring to. (13 responses to the survey and email comments also included below)

Many different topics and suggestions were raised in response to this question. This is an overview of those.

In relation to pharmacy practice and the expanding role of pharmacist-led care, it is suggested that that there should be embedded vaccination training in the undergraduate pharmacy curriculum, and that because vaccination has developed as a year-round activity, the general training for experienced experienced vaccinators needs to be reviewed. It is also suggested that External Quality Assurance (EQA) should take place in pharmacies conducting health checks and should be independently verified. A submission also said that the PSI should ensure that pharmacies do not participate in the promotion of non-evidence based practices or provision of testing, while another stated that the PSI should take responsibility for Garda vetting of pharmacists and pharmaceutical assistants.

Two submissions focused on their request that the PSI move to include pharmacy technicians under its regulatory remit.

On the theme of working with and for others, a submission suggested that the PSI could do more to raise public awareness of the PSI's consumer protection role, and to increase understanding of the pharmacist role, to promote its important place in safe medication use and best patient outcomes, as well as improving collaboration between healthcare providers and agencies to deliver a people-centred health service.

Approximately four submissions referenced clarity and improvements needed either in relation to the pharmacy governance structure and the need to shift responsibilities to pharmacy owners as opposed to the individual pharmacist. There were also two mentions of the need for the PSI to work on placing greater responsibility on medical doctors to comply with legal prescribing requirements, and a lack of equality of regulation with other prescribing/medicine-handling health professionals.

On the Strategy's intention to pursue legislative change, one submission questioned what other measures might be taken in the meantime within the constraints of the existing legislation, as legislative change will take time. Changes needed to regulations was also raised, to reduce administrative burden and to bring these in line with current, modern pharmacy practice.

PSI Response

All suggestions are welcomed and considered. The feedback has assisted us in creating the final Strategy and the details to be contained in the implementation plan. Every point raised during the public consultation cannot necessarily be addressed as a Strategy element, however each of the themes raised give us useful context and items for consideration in the course of our work.

Q4. Are there any additional areas you think should be considered for inclusion in this Corporate Strategy?

Several topics were raised under this question, including the inclusion of hospital pharmacy in the system of regulation; that particular cohorts of registrants be named within the strategy; and that the PSI create a pharmacist forum for consultation and to assist beneficial practice developments with pharmacists. There was feedback received suggesting that the Pharmacy Assessment System and the recommendations of the Future Pharmacy Practice report be considered within the Strategy.

PSI Response

Again, all suggestions are welcomed and considered. All feedback has assisted us in creating the final Strategy and the details to be contained in the implementation plan. Every point raised during the public consultation cannot necessarily be addressed as a Strategy element, however each of the themes do give us useful context and items for consideration in our work.

Q5. Do you have any other comments or suggestions?

The feedback to this question included that the PSI consider changing its name to more clearly demark its regulatory purpose; and that hospital practice have a clearer place in the Strategy and be subject to the same requirements as community practice. It was also noted that there was no reference to the impending Brexit and that it might be useful to acknowledge it in the explanatory sections of the Strategy and the PSI's need to work with NI and UK organisations in this regard.

PSI Response

Again, all suggestions are welcomed and considered. All feedback has assisted us in creating the final Strategy and the details contained in the implementation plan. Every point raised during the public consultation cannot necessarily be addressed as a Strategy element, however each of the themes do give us useful context and items for consideration in our work. We will continue to engage and consult with all of our stakeholders in undertaking our work under this next Strategy.

Consultation respondents

The consultation was predominantly responded to by individuals identifying themselves as

- PSI registrants (74%)
- Others working in regulation or policy (13%)
- Other (8%)
- One response each identified as a pharmacy service user/patient, and another health professional.

12 submissions indicate they were made on behalf of an organisation, with 10 providing their organisation's name:

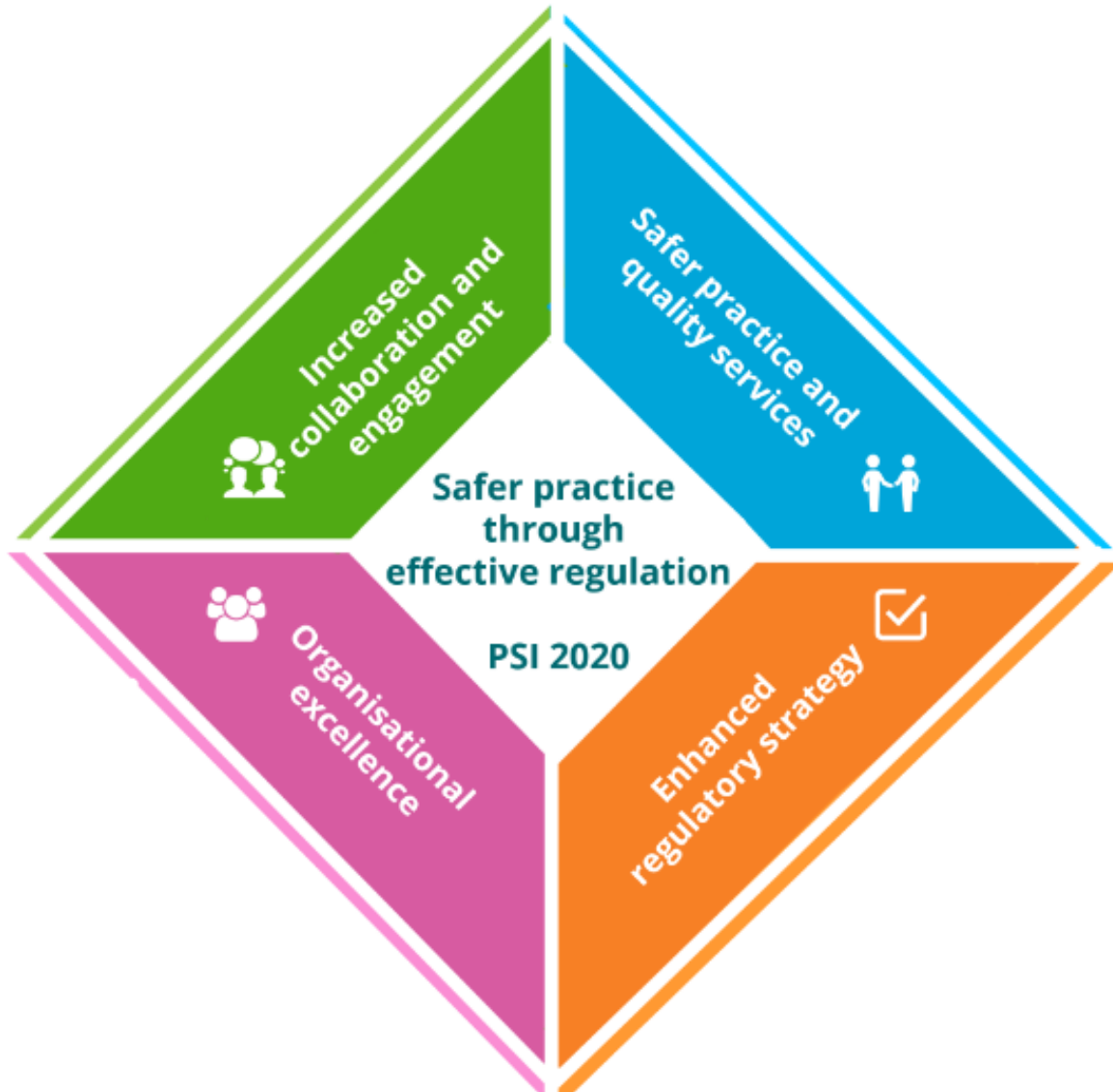
- Irish Heart
- SAGE - Support & Advocacy Service for Older People
- Department of Health
- Irish Pharmacy Union
- Hospital Pharmacists Association
- Pharmaceutical Assistants' Association
- Health Products Regulatory Authority
- Boots Ireland
- Athlone Institute of Technology
- Carlow Institute of Technology

Conclusion

The PSI welcomed the submissions made to this public consultation and we thank all contributors for the information provided. The comments received provide valuable context and information that has assisted us in preparing the PSI's Corporate Strategy for 2018-2020.

Appendix 1 - Consultation Document

Below is the draft Corporate Strategy that we invited feedback on during the public consultation during April 2017.



PSI Corporate Strategy 2018 – 2020

Public consultation, April 2017

Introduction

Our current Corporate Strategy for 2013-2017 is coming to an end and we have started developing our next strategy, which will set out what we, as the pharmacy regulator, want to achieve in the years ahead. The strategy builds on our achievements under the current strategy and establishes the key areas where we will focus our activities in continuing to meet our core responsibilities, and how we will develop our organisation and its resources so that we can carry out our work efficiently and effectively.

We are carrying out a public consultation on the draft Corporate Strategy 2018-2020 to consider stakeholder expectations and to inform our work over the next three years. The strategy proposes four key strategic areas and an overview of the activities we will carry out, so that by 2020 there will be safer pharmacy practice through effective regulation, which will ultimately lead to safer care for patients and the public.

Background and Context

Role and Function of the PSI

The Pharmaceutical Society of Ireland (PSI) protects the health, safety and wellbeing of patients and the public by regulating pharmacists and pharmacies in Ireland.

The Pharmacy Act 2007 establishes the roles and responsibilities of the PSI, which are set out on our website www.psi.ie, and where you will find further information about the work we have been doing under our current Corporate Strategy, 2013 -2017.



Developing the Corporate Strategy 2018-2020

This draft Corporate Strategy 2018-2020 has been developed in consultation with the Council and staff of the PSI. As part of the development of the new strategy we have reviewed our

achievements to date in the establishment of robust systems of regulation that are designed to ensure public confidence in pharmacists and the services provided within pharmacies. We have considered how we have developed as an organisation and we have listened to feedback from those we engage with to inform our work. This public consultation is the next step in this process.

The key themes and objectives that have arisen, as we shape our strategic focus, reflect both an external and internal development context, our founding legislation, organisation values, the PSI's mission and vision, and seeks to align with the Department of Health's strategy and the current Programme for Government.

We are in the tenth year of the Pharmacy Act 2007, a point at which it is timely and important to reflect on how we are meeting our legal responsibilities, and how we will continue to do so into the future, whilst also reflecting on the current environment in which we are operating.

Objectives and Outcomes 2018-2020

The draft Corporate Strategy consists of five elements— four strategic areas that are directed to achieving a central organisational goal, which provides the focus for our work over the next three years. We are committed to furthering what we do and how we work so that by the end of 2020 we are seeing the outcomes of safer pharmacy practice through effective regulation.



Safer practice and quality services

We will assure the safe practice of pharmacists and the quality of pharmacy services, while enabling future developments in pharmacy.

As in previous years, there will continue to be demands placed on the health service, and on the provision of care by pharmacists and in pharmacies. The means of providing safe health care and services will evolve in the face of opportunities and challenges. We will continue to support and encourage developments in pharmacy, where there is health system need and public benefit, and ensure that pharmacists' education and practice standards evolve to meet these changes. We will ensure the effective roll out of the recently changed standards set for education, training and CPD by the PSI, and innovative pharmacist-led care and changing approaches to pharmacy practice will continue to be underpinned by regulatory safeguards that provide public confidence. We will utilise our knowledge and research to inform policy development and support legislative changes relating to pharmacy and healthcare reform into the future. We will also ensure that the means of access to the registers to practice as a

pharmacist or to operate a pharmacy in Ireland, continue to be monitored and reviewed so that we are carrying out our responsibilities in the most effective manner.

Outcomes

1. Pharmacy delivered care and services that are reliable, safe and effective.
2. Informed policy development and legislative change, supported by the PSI, where pharmacy practice input is considered alongside public safety and improved health outcomes.
3. Broader health policy is informed through our research and knowledge and where there is public or health service benefit, a greater role for pharmacy services as part of more integrated care structures is underpinned by appropriate regulatory structures.
4. Robust and streamlined registration processes that ensure registered pharmacists and pharmacies are safe and instil public confidence.
5. New forms of education, training and CPD that are effectively contributing to and underpinning good professional standards.



Increased collaboration and engagement

We will optimise our engagement and communication with others to advance our mission and increase understanding of our role.

Our strategy ensures that we will communicate widely and work extensively with others. We will engage regularly with the Department of Health, government agencies, regulators, pharmacy service users, the public and our registrants, providing opportunities to learn from others and inform our work. This will include partnering with others to advance our mission and to achieve efficiencies in regulatory functions. We also want to build greater awareness of our role as the pharmacy regulator, so that people know the standards they can expect from pharmacists and pharmacies and where to turn to if they have a concern about the pharmacy care they receive. We want to ensure that we contribute effectively to the patient and public health safety network and the efficient provision of care.

Outcomes:

1. PSI is a recognised contributor at key health, patient safety and regulatory fora at national and EU level.
2. Effective partnerships established resulting in informed policy development relating to pharmacy practice both currently and into the future.
3. PSI activities and wider health policy better informed through proactive communication and engagement with others.

4. Increased awareness and understanding of the PSI's role and the pharmacy regulatory system in Ireland.



Enhanced regulatory strategy

We will ensure a proportionate and effective approach to regulation.

The PSI's main role and functions are established in the Pharmacy Act 2007, including establishing the governance structures to enable us to carry out our work. Ten years on, we are conscious that reform of aspects of the legislation is necessary to support a modern, effective and fair system of regulation for health professionals. Over the course of the strategy we intend to actively pursue changes where they are needed, in the interests of efficiency and public safety. At the same time, we will enhance how we operate and make best use of the information we gather to develop a more risk-based approach to how we regulate. The strategy takes account of our need to address changes arising, including European provisions, and envisages that we review our systems and allocate resources to meet those demands. We will continue to make available information that is gained in the course of our work so that everyone can learn from the regulatory process; contributing to a greater understanding of our role, and to ensuring a collective approach to protecting the integrity of pharmacy practice in Ireland and increased awareness of the standards that should be expected by all who receive care, advice and treatment in a pharmacy.

Outcomes:

1. Regulatory model that is proportionate and responsive.
2. Reforms to our governing legislation to allow for a more meaningful and effective pharmacy regulator.
3. Risk-based pharmacy regulation that is transparent, promotes outcome achievement and targets those who don't comply.
4. Increased compliance in practice, resulting in safe and effective services to the public.



Organisational excellence

We will foster and promote an agile and high-performing organisation.

Like all organisations, we must constantly strive for improvement and innovation, and work in a co-ordinated fashion to make the most beneficial use of our resources, our people and our time. We have placed a focus on organisation development with a commitment to creating a positive work environment for staff, enhancing our processes, how we make use of the data

that we gather, and how we assess our performance. Our ongoing improvement will ultimately benefit all the people that we have a responsibility to, and who engage with us.

Outcomes:

1. Positive, people-focussed workplace that supports change and strives for continuous improvement.
2. Enhanced organisation and governance structures established, enabling effective risk management, leading to improved performance.
3. Funding streams and workforce development strategy aligned to achieve our strategic objectives and carry out our regulatory functions.
4. ICT systems that effectively support our internal processes and new automated online user services to streamline engagement with us.
5. Work and processes audited and refined through ongoing internal and external reviews and accreditation.

PSI Draft Corporate Strategy 2018–2020



How you can participate



Consider the strategy objectives and activities that we are proposing and then choose one of the following ways to submit your feedback:

- Answer our online consultation survey
- Send us an email to consultation@psi.ie
- Send a submission to Strategy Consultation, PSI House, 15-19 Fenian Street, Dublin 2, D02 TD72

All responses should be received Tuesday, 2 May 2017.

Use of your information

The information collected will be used only to develop the new PSI Corporate Strategy. After each public consultation, we make available a consultation report on our website that contains a summary of the comments received, how we have considered them, and it lists the names of organisations or individuals (where provided) that have given feedback. Please note that submissions made to the PSI during its public consultations are subject to the provisions of the Freedom of Information Act 2014.

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