

ANNUAL REPORT 2010

THE PHARMACEUTICAL SOCIETY OF IRELAND



CONTENTS

Foreword	2
Introduction by Ms. Noeleen Harvey, PSI President	3
Registrar's Report	4
PSI Council 2010	9
Report from the President and the Registrar	10
Statement on the Systems of Internal Financial Control	11
Financial Report (for the period 1st January 2010 - 31st December 2010)	13
Independent Auditors' Report to the Council of the PSI (for the period 1st January 2010 - 31st December 2010)	16
Income and Expenditure Account (for the period 1st January 2010 - 31st December 2010)	18
Balance Sheet (for the period 1st January 2010 - 31st December 2010)	19
Appendix A Attendance of Council Members in 2010	22
Appendix B Attendance of Committee Members in 2010	23
Appendix C Fees and expenses paid to Council Members in 2010	27
Appendix D Operational Activity by Unit	28

FOREWORD

This annual report is presented to the Minister for Health in accordance with paragraph 17(1) of Schedule 1 to the Pharmacy Act 2007.

THE PHARMACEUTICAL SOCIETY OF IRELAND

The Pharmaceutical Society of Ireland (PSI) is the statutory body for pharmacists and pharmacies in Ireland, established by the Pharmacy Act 2007. It acts in the public interest to regulate the profession.

PSI COUNCIL (1st January to 31st December 2010)

The Council consisted of the President and Vice-President and 19 other Council members as at 31st December 2010 as follows:

President: *Ms. Noeleen Harvey
Vice-President: *Mr. Paul Fahey
Council Members: *Ms. Leonie Clarke
*Mr. John Collins

*Ms. Margaret Doherty
*Dr. Ann Frankish
*Mr. Eoghan Hanly
*Dr. Bernard Leddy
*Ms. Kate Mulvenna
Mr. Stephen Boyle**
Ms. Cathriona Hallahan**

Dr. John Hillery** Mr. Aidan Horan** Ms. Ita Kelleher** Ms. Deirdre Larkin** Ms. Michelle Ní Longáin**

*Prof. Paul Gallagher (Pharmacy Schools Nominee)**

Mr. Sean Hurley** (Health Service Executive (HSE) Nominee)**

Prof. June Nunn (CPD in relation to pharmacy)**
Asst. Garda Comm. Ms. Nóirín O'Sullivan**

Ms. Rita Purcell (Irish Medicines Board (IMB) Nominee)**

Council Members who were in office for a period of 2010 are outlined below:

*Mr. Darragh O' Loughlin Resigned from Council 26th April 2010

The names of the members of the Advisory Committees to Council are listed in Appendix B to this report. The organisational structure of the PSI is available on the PSI's website

The Internal Audit function in 2010 was undertaken by an accountancy firm Crowleys DFK, 16/17 College Green, Dublin 2. The external auditors in 2010 were Anne Brady McQuillans DFK, Ivy Court, Harcourt Street, Dublin 2.

REGISTERED OFFICE OF THE PHARMACEUTICAL SOCIETY OF IRELAND:

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^{*}Pharmacist

^{**}Ministerial appointees as per s10(3) of the Pharmacy Act 2007

INTRODUCTION

In 2010 the PSI continued to work closely and effectively with other Regulatory bodies both at home and abroad. We signed a Memorandum of Understanding with the Crisis Pregnancy Agency (now called the Crisis Pregnancy Programme under the auspices of the HSE) and the Health Information and Quality Authority.

The PSI set the strategy for the next three years in it Corporate Strategy 2010-2012. The next three years will present a series of challenges to the PSI as the independent regulator. The PSI has to have in place the resources and expertise to discharge its responsibilities to patients and the public, and also the practising profession which benefits from a safe, well regulated pharmacy sector.

The PSI continued to work in 2010 on a number of major reviews and reports in areas such as undergraduate pharmacy education and continuing professional development for pharmacists. The PSI has also completed a baseline analysis of current pharmacy practice in Ireland, to generate an opportunity to build on the strengths of what already exists and to prepare the sector for the challenging periods ahead.

I wish to acknowledge the significant contribution and commitment of my fellow Council members and the co-operation and assistance of the Registrar and staff of the PSI during the past year and to thank them for achieving the results outlined in this report. I would like to acknowledge the contribution of all Council members who have served on the Council since 2007 and I would like to take this opportunity to thank, in particular, former Council member Mr. Colm Fagan, whose name was inadvertently omitted from the 2009 Annual Report introduction, for his contribution.

As President, I wish to formally acknowledge the assistance and support of the former Minister for Health and Children, Ms. Mary Harney T.D. I also wish to sincerely thank my colleagues in the representative bodies and all of the pharmacists and pharmacy owners who work with us on a day to day basis. I am also grateful for the assistance of the various patient advocacy groups and key influencers and opinion makers in the pharmacy sector. I place a high value on the courtesy and kindness they have shown to me on a personal basis during my time as President.

It would be remiss of me not to express my gratitude to Dr. Kamal Midha, President of the International Pharmaceutical Federation (FIP) and the whole FIP organisation for awarding the 2013 Annual Congress to Ireland. I look forward to the PSI jointly hosting, in partnership with all of the other bodies engaged with the pharmaceutical sector in Ireland.

I would like to take this opportunity to formally recognise the significant contribution of the late Dr. Joan Warren, one of our senior pharmacist inspectors, who died tragically in April 2010. I wish to extend my sympathy and that of the PSI Council and staff to her husband John, her children, family and friends.

Finally, on a personal note, I am deeply honoured to serve as President and would like to specifically thank the Vice-President, Mr. Paul Fahey for his help and support.

Ms. Noeleen Harvey President

1) Howey

REGISTRAR'S REPORT

In 2010 the PSI strove to continuously improve the performance and effectiveness of the organisation. The PSI placed increased emphasis on robust management systems, procedures and processes underpinned by an appropriate ICT infrastructure. In line with the Corporate Strategy 2010-2012 we restructured the organisation by separating the Registration and Qualification Recognition Unit and Professional Development and Learning Unit and allocating a Head to each Unit. We also restructured the Standards and Practice Unit into the Pharmacy Practice Development Unit to facilitate and support the greater involvement of pharmacists in the delivery of integrated, patient centre and cost effective health service provision. The PSI is anxious to ensure the pharmacy sector is in a position to contribute to adding more value for both patients and taxpayers in the current difficult economic environment.

REGISTRATION AND QUALIFICATION RECOGNITION

In 2010 the total number of pharmacists added to the Register of Pharmacists held by the PSI was 270, this represented a decrease of 1 from 2009 and a decrease of 117 from 2008. The number of pharmacists registered by the PSI through the different routes from 2007 to 2010 is illustrated below in figure 1.

The number of registered pharmacists increased from 4,451 in 2009 to 4,467 in 2010 and the number of registered pharmaceutical assistants decreased in 2010 by 22 due to 15 voluntary and 7 involuntary cancellations (figure 2).

INSPECTION AND ENFORCEMENT

In 2010, in line with the PSI's statutory obligations to ensure compliance with pharmacy and medicines law,



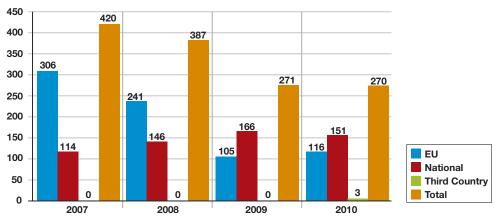


FIG.2 THE NUMBER OF PHARMACISTS AND PHARMACEUTICAL ASSISTANTS ON THE REGISTER FROM 2007–2010

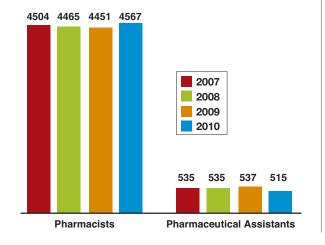
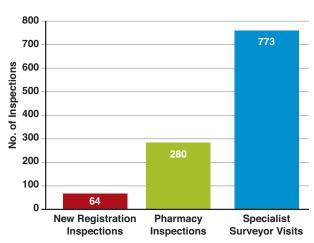


FIG.3 NUMBER OF INSPECTIONS BY INSPECTION TYPE

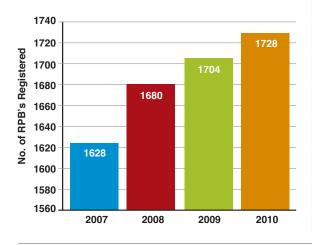


with the statutory Code of Conduct for pharmacists, and with good pharmacy practice, 344 inspections were carried out by authorised officers of the PSI and 773 specialist surveyor visits were conducted. The activity levels of the Inspection and Enforcement Unit are illustrated in figure 3.

The total number of retail pharmacy businesses on the PSI Register at the end of 2010 was 1,728 which was an increase of 24 pharmacies from 2009 as illustrated in figure 4.

The number of new registrations decreased from 80 in 2009 to 72 in 2010 and the total number of cancellations of registration decreased from 56 in 2009 to 48 in 2010 as illustrated in figure 5. The number of new openings

FIG.4 TOTAL NO. OF RETAIL PHARMACY BUSINESSES ON THE PSI REGISTER



decreased from 51 in 2009 to 43 in 2010, the number of relocations also decreased from 16 in 2009 to 10 in 2010 and the number of transfers of ownership increased from 13 in 2009 to 18 in 2010.

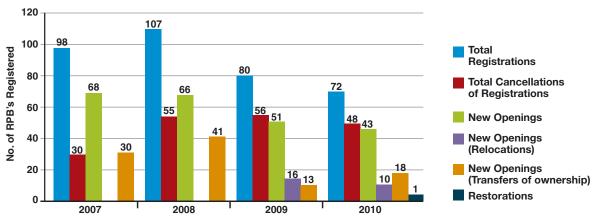
PROFESSIONAL DEVELOPMENT AND LEARNING

In 2010 significant work was done by the Professional Development and Learning Unit to oversee the development of the recommendations contained in two major policy reports, which were commissioned by the Council. The Pharmacy Education and Accreditation Reviews (PEARs) Report was a major root and branch review of the five year pharmacy undergraduate education and training. This is a statutory function provided for in Section 7(1) of the Pharmacy Act 2007.

Section 7(1) also requires the Council to ensure that all pharmacists undertake appropriate continuing professional development including the acquisition of specialisation. Council commissioned a Review of International Continuing Professional Development Models in order to put in place a modern, effective system of post-registration education, training and ongoing professional development for pharmacists.

In line with the statutory obligation conferred on the PSI by Section 7(2) of the Pharmacy Act 2007, the recommendations contained in these two reports present the Department of Health and Children, pharmacy sector and the profession of pharmacy with a solid platform on which to build the future of pharmacy practice in Ireland including significant and major expansion of the scope of pharmacy practice. Pharmacy practice in

FIG.5 TOTAL NO. OF REGISTRATIONS AND CANCELLATIONS OF REGISTRATION OF RETAIL PHARMACY BUSINESSES



Ireland can now be brought into line with evidence based best international practice and this will add significant value for patients, the public and those who fund and use pharmacy services. The recommendations in these reports will also provide an opportunity for the profession of pharmacy to contribute, in a direct and meaningful way, to the further development of the pharmaceutical industry in Ireland and enable it to support the economic recovery of Ireland.

FITNESS TO PRACTISE AND LEGAL AFFAIRS

The full system of fitness to practise pharmacy and fitness to operate pharmacies is now in place and operating to a high level of effectiveness. A total of 43 formal complaints were received in 2010 and the

majority of these were from members of the public as illustrated in figure 6.

The complaints received in 2010 are broken down further into categories in figure 7. The highest number of complaints received related to failure to adhere to professional and/or legal standards of practice including general code of conduct issue. Of the 43 complaints received 29 of these were referred to the Preliminary Proceedings Committee in 2010 and 7 of these were referred to the Professional Conduct Committee. No hearings or mediation were concluded in 2010.

In addition to processing formal complaints for the purposes of Part 6 of the Pharmacy Act 2007, the Unit also deals with expressions of concern. The PSI dealt with 175 such concerns in 2010. As illustrated in figure 8 the majority of concerns originated from members of the public.

The concerns received are broken down into categories in figure 9 with the highest number of concerns being failure to adhere to professional and/or legal standards of practice including general code of conduct issues.

Of the 175 expressions of concern, 23 resulted in formal complaints under the fitness to practise and fitness to operate system provided for in Part 6 of the Pharmacy Act 2007, 61 were referred to other Units including the Inspection and Enforcement Unit for further action and 77 having been formally reviewed required no further



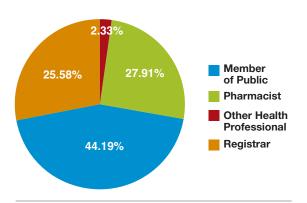
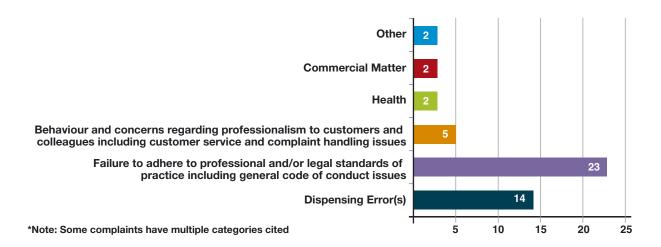


FIG.7 CATEGORIES OF COMPLAINTS RECEIVED

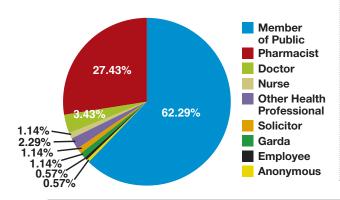


action. The remaining 14 expressions of concern are still under examination at the end of the year. The response of the PSI to complaints and concerns is independently audited by a national patient advocacy group with experience in this area.

PHARMACY PRACTICE DEVELOPMENT

In 2010, significant work was done by the Pharmacy Practice Development Unit developing guidelines to facilitate compliance with the Regulation of Retail Pharmacy Businesses Regulations S.I. No. 488 of 2008 primarily and the Pharmacy Act 2007, specifically in relation to patient consultation areas and guidance on the safe supply of non-prescription medicines containing codeine. Draft guidelines on sourcing, storage and disposal of medicinal products were issued in 2010 for

FIG.8 BREAKDOWN OF EXPRESSIONS OF CONCERN BY SOURCE 2010



public consultation. The Unit also issued guidance in relation to expiry date checking of medicinal stock and issued a practice notice outlining the legal requirements and professional obligations of pharmacists in relation to the supply of medicines to patients in residential care settings/nursing homes. In addition the Pharmacy Practice Development Unit works very closely with bodies such as the Health Service Executive, the Irish Medicines Board and the Department of Health Children and it provided a range of information on pharmacy practice to the profession.

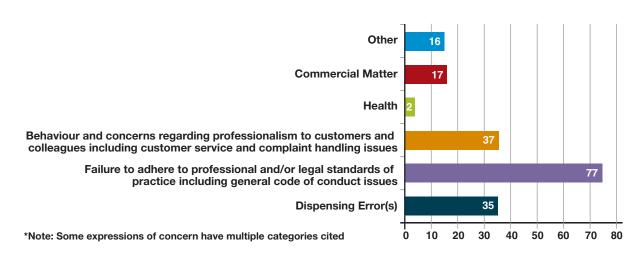
COMMUNICATIONS AND PUBLIC AFFAIRS

The Communications and Public Affairs Unit, in 2010, managed the relationship with the media and other stakeholders through press releases, media interviews and other activities. The PSI's new website was launched in December 2010 and significant work was done in conjunction with other PSI units to develop the content for the new website.

INFORMATION AND COMMUNICATIONS TECHNOLOGY

Significant work was done in 2010 with regard to updating the PSI's database and enhancing the online capabilities of the PSI's registration process. The use of online facilities increased from 24% in 2009 to 32% in 2010. The ICT Unit in conjunction with the Office of the Registrar also successfully introduced the use of iPads for the management of Council documentation.

FIG.9 CATEGORIES OF EXPRESSION OF CONCERNS RECEIVED



ADMINISTRATION AND FINANCE

The PSI commissioned a review of compliance with the Code of Practice for the Governance of State Bodies in 2010 which is due to be reported on in early 2011. The Administration and Finance Unit continues to achieve the highest level of value for money possible in all of the transactions of the PSI. In 2010 new financial reporting systems were developed and enhanced information is now available to Council, Committee and the Executive. All of the relevant directives from the Departments of Finance and Health and Children were implemented. The PSI also continued to keep risk management at the core of all of its activities and included it in the Terms of Reference of all of its Advisory Committees.

The Audit Committee met on five occasions in 2010 and the attendance records of the meetings are outlined in Appendix B. In 2010, the Audit Committee approved a three year rolling internal audit plan for 2010-2012.

OFFICE OF THE REGISTRAR

The PSI works with a wide range of stakeholders, regulatory bodies and partners with statutory agencies on patient safety and public interest agendas. I wish to express my sincere thanks to all of the organisations and recognise the important contribution they make in the interests of patients, the profession and the public.

The Office of the Registrar works effectively with colleagues in the Department of Health and Children, Secretary General Mr. Michael Scanlan, Assistant Secretary Mr. Paul Barron, Chief Pharmacist Ms. Marita Kinsella and the Chief Medical Officer Dr. Tony Holohan. The Registrar's office also works effectively with the senior management of the Health Service Executive (HSE), the Irish Medicines Board (IMB), the Health Information Quality Authority (HIQA), An Garda Síochána and the Department of Agriculture, Fisheries and Food on matters of mutual interest.

The Health and Social Care Regulatory Forum, of which the PSI is a member, is now playing a valuable role in influencing policy development in matters relating to patient safety and public protection. I wish to thank all of the organisations for their assistance and the opportunity to work on many joint initiatives which bring benefit to all of the organisations involved and in particular to the patients we serve.

Progress continues to be made on the PSI Council's Pharmacy Ireland 2020 initiative with the establishment in late 2010 of a National Pharmacy Reference Group and an initiative in partnership with the HSE Clinical Programmes and Strategies Directorate to ensure pharmacy engagement with the work of the Directorate. The work of the Reference Group and of the HSE Directorate enables the more active involvement of pharmacists in the delivery of integrated, patient-centred, cost-effective health services.

The PSI has also developed a very effective working relationship with the Schools of Pharmacy and I would like to thank the Presidents, Provost, Chief Executives, Heads of Schools and the staff of the various Schools for their help and support in 2010.

The President, Vice-President and Chairs of Committees continued to work very effectively with members of the Senior Management Team in delivering on the strategic objectives outlined in the Corporate Strategy 2010-2012 and the key elements of the annual Service Plan 2010 which are presented in this report. In conclusion, I wish to place on record my appreciation for the hard work and very significant contribution of the staff of the PSI, Council and Committee Members, without whom the results outlined in this annual report would not have been achieved.

Dr. Ambrose McLoughlin

Celforth

Registrar

PSI COUNCIL 2010

- The PSI Council held seven public and six private meetings in Dublin in 2010 on the following dates; 26th January; 25th March; 25th May; 1st June; 30th September; 4th November and 30th November.
- The overall attendance at Council meetings and Committee meetings was high. This reflects the high level of commitment from individual members of Council and Committees. As required under the Code of Practice for the Governance of State Bodies, the attendance levels, fees and expenses paid to members of the Council are set out in Appendix A and C.
- The PSI Council held an election on 25th May 2010 to appoint a President and Vice-President. Ms. Noeleen Harvey was re-elected as President and Mr. Paul Fahey was re-elected as Vice-President, each for a further one year term.

PSI COUNCIL-MAJOR POLICY INITIATIVES

- The PSI Council approved the Corporate Strategy 2010-2012 on the 25th March 2010.
- The PSI Council successfully led Ireland's bid to host the International Pharmaceutical Federation (FIP) 2013 annual Congress. This important annual event was last held in Dublin in 1975.
- In line with the PSI's Corporate Strategy to develop evidence based standards for the provision of good pharmacy practice and compliance with the regulation of retail pharmacy businesses regulations 2008 S.I. No. 488 of 2008 the PSI Council approved guidelines on patient consultation areas in retail pharmacy businesses and guidance for pharmacists on the safe supply to patients on non-prescription medicines containing codeine.
- In line with the PSI's Corporate Strategy to put in place a modern, effective system of pre- and post-registration education, training and ongoing professional development for pharmacists and in line with its requirements under the Pharmacy Act 2007 the PSI Council also approved and commenced the implementation of the Pharmacy Education and Accreditation Reviews (PEARS) Project Report and the

- report on the Review of International Continuing Professional Development (CPD) Models. The Council also developed a partnership with the Ontario College of Pharmacists in the context of the implementation of the CPD model.
- The PSI Council approved the Professional Registration Examination syllabus for each of the sittings which took place in May and November 2010. The first cohort of 139 students from the MPharm programme graduated in November 2010.
- The PSI signed a Memorandum of Understanding with the Crisis Pregnancy Agency (now called the Crisis Pregnancy Programme under the auspices of the HSE) and the Health Information Quality Authority.
- The PSI became a signatory to the Patient Safety First initiative in September 2010. The PSI is also contributing and participating in a number of key policy matters including the Medication Safety Forum and Council of Europe.
- The PSI works in partnership with the other health regulators under the auspices of the Health and Social Care Regulators Forum leading on such matters as Inspection and Enforcement. In addition the PSI is contributing to the development of joint policy positions on complaints, matters relating to registration and reviewing legal affairs and the implementation of the framework for public and service user involvement in regulation.
- The PSI contributes directly at national and at EU level on matters related to professional qualifications directive 2005/36/EC. The PSI works through the EU Healthcare Professionals Crossing Borders Forum on policy matters related to patient safety and public protection.

REPORT FROM THE PRESIDENT AND THE REGISTRAR

In compliance with the Code of Practice for the Governance of State Bodies 2009 paragraph 13.1, we would like to confirm that:

- i. There were no commercially significant developments affecting the PSI in 2010.
- ii. All appropriate procedures for financial reporting, internal audit, travel, procurement and asset disposals are being carried out.
- iii. A statement on the Systems of Internal Financial Control has been included as part of this Annual Report.
- iv. Codes of Conduct for Council, Advisory Committee Members and employees of the PSI have been put in place and adhered to.
- v. Government policy on the pay of Chief Executives and all State body employees is being complied with.
- vi. The Guidelines for the Appraisal and Management of Capital Expenditure Proposals in the Public Sector are being complied with.
- vii. Government travel policy requirements are being complied with in all respects.

- viii. The Code of Practice for the Governance of State Bodies 2009 is being complied with.
- ix. The PSI complies with disposal procedures for assets as outlined in the Code of Practice for the Governance of State Bodies. The Pharmacy Act 2007 states that any surplus following disposal of assets can be spent on the development of education, research or any other public purpose connected with pharmacy.
- x. The PSI adheres to the guidelines for the Appraisal and Management of Capital Expenditure Proposals issued by the Department of Finance.
- xi. The PSI has in place appropriate procedures to monitor, report and enforce relevant rules and requirements regarding foreign travel by employees of the PSI and Council Members as outlined in the Code of Practice for the Governance of State Bodies
- xii. The PSI complies with Government guidelines on the payment of Council Members fees and Government policy on the pay of Chief Executives and all employees.

xiii. The PSI complies with its obligations under tax law.

This report has been formally approved by the PSI Council and signed by the President and the Registrar:

Ms. Noeleen Harvey
President

N Howay.

Dr. Ambrose McLoughlin Registrar

Celfall

STATEMENT ON THE SYSTEMS OF INTERNAL FINANCIAL CONTROL

(FOR THE YEAR ENDED 31ST DECEMBER 2010)

RESPONSIBILITY FOR THE SYSTEM OF INTERNAL FINANCIAL CONTROL

On behalf of the PSI, we acknowledge our responsibility for the system of internal financial control in the PSI and for putting in place processes and procedures for the purpose of ensuring that the system is effective.

The system can provide only reasonable and not absolute assurance that assets are safeguarded, transactions authorised and properly recorded, and that material errors or irregularities are either prevented or would be detected in a timely period.

The Council and the Registrar have taken steps to ensure an appropriate control environment is in place by:

- Establishing formal procedures through various Committee functions to monitor the activities and safeguard the assets of the organisation
- Clearly defining and documenting management responsibilities and powers
- Developing a strong culture of accountability across all levels of the organisation
- Working closely with Government and various agencies and institutions to ensure that there is a clear understanding of the functions of the PSI and support for the PSI's strategies to fulfill its statutory obligations
- Ensuring only salary rates approved by the Minister for Health and Children are paid to employees

The Council and Registrar have also established processes to identify and evaluate risks to the organisation. This is achieved in a number of ways including:

- Identifying the nature, extent and financial implications of risks facing the PSI
- Assessing the likelihood of identified risks occurring
- Assessing the PSI's ability to manage and mitigate the risks that do occur

- Carrying out regular reviews of strategic plans and objectives both short and long term and evaluating the risks to bringing those plans to fruition
- Setting annual and longer term targets for each area of the organisation followed by regular reporting on the results achieved

The system of internal financial control is based on a framework of regular management information, administrative procedures including segregation of duties, and a system of delegation and accountability. In particular it includes:

- A detailed budgeting system with an annual budget which is reviewed and agreed by the Council
- Regular reviews by the Administration and Finance Committee and the Council of periodic and annual financial reports which indicate financial performance against forecasts
- Setting targets to measure financial and other performances

The procedures for monitoring the effectiveness of the internal financial control system are outlined below:

The PSI has an internal audit system which consists of the Internal Auditors and the Audit Committee. The Audit Committee meets on a quarterly basis to review reports prepared by Internal Audit and to discuss other relevant issues. The Audit Committee assures Council that the PSI has adequate financial and non-financial control systems in place. The Audit Committee reports regularly to the Council in relation to the matters that it has considered.

The PSI operates in accordance with the Code of Practice for the Governance of State Bodies. A rolling three-year Internal Audit Plan is approved by the Audit Committee and revised annually where required. The current work plan takes account of areas of potential risk identified in a risk assessment exercise carried out with management. The Internal Auditor provides the Committee with quarterly reports on assignments carried out. These reports highlight deficiencies or weaknesses, if any, in the system of internal financial control and the recommended corrective measures to be taken where necessary.

We confirm that in the year to 31st December 2010, the Council conducted a review of the system of internal financial controls. The Audit Committee reviewed reports from the Internal Auditors on Travel, Subsistence and Credit Card Transactions for the Registrar, staff, and Council Members of the PSI during the period 22nd May 2007-2008, Income and Fees, Creditors and Purchasing and Tendering and were satisfied that proper processes and procedures were followed. The Audit Committee report to Council at each of their quarterly meetings. An

interim audit was carried out by the External Auditors during 2010.

The Council's monitoring and review of the effectiveness of the system of internal financial control is informed by the work of the Internal Auditor, the Audit Committee which oversees the work of the Internal Auditor, the External Auditor and the senior managers within the PSI who have responsibility for the development and maintenance of the financial control framework.

This report has been formally approved by the PSI Council and signed by the President and the Registrar:

Ms. Noeleen Harvey

N Howay.

President

Dr. Ambrose McLoughlin

Celforthe

Registrar

FINANCIAL REPORT

(FOR THE PERIOD 1ST JANUARY 2010 - 31ST DECEMBER 2010)

SUMMARY

The 2010 Annual Accounts of the PSI have been audited by our Auditors Anne Brady McQuillan DFK, and are detailed in the Financial Statements 2010.

In 2010 the fees for continued registration of pharmacists, pharmaceutical assistants and retail pharmacy businesses were reduced with the approval of the Minister for Health and Children by 10%. Consequently our income fell to €6.221m in 2010 from €6.993m in 2009.

The total cost of operations in 2010 was €5.369m compared with €5.373m in 2009. Direct pay costs fell from €2.073m to €1.939m in the year. There was an increase in approved staff numbers to 25 to cope with the expanded workload in Inspection and Enforcement, Legal Affairs and Fitness to Practise Units. The PSI superannuation schemes cover all eligible employees. Funds are held on deposit pending the decision of the Department of Finance on the funding mechanism.

The total operating surplus in 2010 was €0.892m compared with €1.637m in 2009. This surplus includes the annual designated reserve for possible legal actions

against the PSI of €500,000 as agreed by Council.

The balance sheet as at 31st December 2010 shows that the total assets exceed liabilities by \leq 5.069m compared with \leq 4.177m at 31st December 2009. This is represented as follows:

	€5.069m
Designated Reserve (future legal costs)	1.500
Income and Expenditure Account	2.408
Revaluation Account	1.161
	€m

The Auditors state that in their opinion the Financial Statements give a true and fair view of the state of the PSI's affairs at 31st December 2010 and that the results for the year have been properly prepared. They also confirm that they obtained all the information and explanations necessary for the purpose of the audit and that proper books of accounts have been kept by the PSI.

Financial Results 2010

Table 1 below outlines the overall result for 2010 as detailed in the Financial Statements 2010.

TABLE 01.

Outturn of expenditure for year 2010				
	Original Budget	Outturn	Variance	% Variance
	€000	€000	€000	%
Total Income	5,975	6,291	316	5%
Expenditure				
Pay Costs	2,787	2,432	(355)	(13%)
Non Pay Costs	2,688	2,967	(279)	(10%)
Total Expenditure	5,475	5,399	(76)	(0.01%)
Reserve Fund	500	500	Brought Forward	0
Surplus	-	392	Brought Forward	
Total Expenditure and Transfer to Reserves	5.975	6,291	496	5%

CASH MANAGEMENT

In 2010 the PSI Council approved the opening of accounts with the National Treasury Management Agency (NTMA). A current account and a deposit account are held with Ulster Bank. In 2010 the PSI did not have to use overdraft facilities. Provision has been made on the specific direction of Council to deal with legal contingencies that may arise, in line with proper governance practice of statutory bodies.

PAY COSTS

The total pay and pension costs in 2010 was €2.432m. The level of permanent whole time staff approved by the Department of Health and Children and the Department of Finance in 2010 was 25 and was not exceeded.

The Service Plan 2010 provided for the recruitment of additional staff to cope with the increased workload related to Part 6 of the Pharmacy Act 2007. Approvals from the Department of Health and Children were delayed, consequently the pay costs did not reach budgeted levels. Services were purchased from external sources particularly in the legal area to enable the PSI fulfil its statutory obligations.

In compliance with Schedule 1, para. 13 of the Pharmacy Act 2007 and as required by the Code of Practice for the Governance of State Bodies, the Registrars salary as approved by the Minister for Health and Children and graded at Assistant Secretary/University Professor/ CEO level 3 is €145,952p.a.

The travel and subsistence expenses paid to the Registrar in 2010 were €3,447 and were formally approved by the President of the PSI and are subject to scrutiny by the Internal Auditor and the Audit Committee. In addition the travel expenses paid to the Council and employees of the PSI are subject to scrutiny by the Internal Auditor and the Audit Committee and are formally approved by the Registrar.

In compliance with Schedule 1, para. 14 of the Pharmacy Act 2007, staff pay rates in the PSI are those approved by the Minister for Health and Children for health sector grades. No overtime, bonuses or performance payments were paid by the PSI in 2010 in accordance with the directive of the Department of Finance. All staff continued to be subject to the public sector levies imposed by Government in 2009.

Following the Government decision to reduce public sector pay costs from 1st January 2010, all PSI staff pay rates for whole time, part time and temporary employees were reduced from that date in line with the levels prescribed by the Department of Finance and the Department of Health and Children.

The level of absenteeism by PSI staff is again low. The level of commitment and dedication to work by PSI is highly valued by the Registrar and Council.

NON PAY COSTS

The total non-pay costs in 2010 were €2.967m. The major elements were:

- Legal and Professional Fees
- General Office Costs
- Council Fees (Government guidelines on the payment of Council Member fees are fully complied with)
- Insurance Costs
- Energy Costs
- Depreciation
- Bank Charges
- ICT Costs

LEGAL COSTS

The demand for legal services continued to grow in 2010 due to the number of complaints and fitness to practise cases being processed. Separate legal advisors have to be engaged by the Council, the relevant Committee and the Registrar to ensure that the requirements arising from the High Court decision in the case of Prendiville & Anor -v- The Medical Council & Ors, [2007] IEHC 427 (2007) are met. In 2010 the cost of routine legal services was €206,000 with a further €80,000 spent on special legal matters. The PSI is seeking a joint approach with the other organisations and the Department of Health and Children with a view to controlling such costs.

OTHER COSTS

In 2010 we again used our procurement procedures to ensure that purchases were obtained at the lowest possible level. Travel costs increased to €106,000 from €65,000 due to the increased number of staff in the Inspection and Enforcement Unit and the resulting increase in activity and also the increased activity of our various committees. Printing, postage and stationery costs rose from €215,000 in 2009 to €242,000 in 2010.

Depreciation costs in 2010 are €286,000 compared to €268,000 in 2009.

INCOME

Income in 2010 fell to €6.221m compared to €6.993m in 2009, due to the reduced level of fees approved by the Minister for Health and Children.

SUPERANNUATION

The PSI has a statutory obligation to provide for superannuation schemes in accordance with Schedule 1 para. 15 of the Pharmacy Act 2007. All employees of the PSI are required to be members of the superannuation scheme and contributions are deducted from salary. The PSI pays an employer's contribution of 25%-30% depending on the Social Welfare status of the employee. The superannuation funds are currently invested with NTMA pending a decision from the Department of Finance on the funding mechanism to be applied to the schemes. The schemes were previously approved by the Department of Health and Children.

INDEPENDENT AUDITORS' REPORT TO THE COUNCIL OF THE PSI

We have audited the financial statements of the Pharmaceutical Society of Ireland for the year ended 31st December 2010 which comprise the income and expenditure account, the balance sheet, cashflow statement and the related notes. These financial statements have been prepared under accounting policies. Full statements of account are available from the PSI.

This report is made solely to the Council, as a body in accordance with Schedule 1, para. 16 of the Pharmacy Act 2007 and Generally Accepted Accounting Practice in Ireland. Our audit work has been undertaken so that we might state to the PSI's Council those matters we are required to state to them in an auditor's report and for no other purpose. To the fullest extent permitted by law, we do not accept or assume responsibility to anyone other than the PSI and the PSI Council as a body, for our audit work, for this report, or for the opinion we have formed.

RESPECTIVE RESPONSIBILITIES OF COUNCIL AND AUDITORS

The Council is responsible for preparing the Annual Report and the financial statements in accordance with Schedule 1, para. 16 of the Pharmacy Act 2007 and the accounting standards issued by the Accounting Standards Board and promulgated by the Institute of Chartered Accountants in Ireland (Generally Accepted Accounting Practice in Ireland), as set out in the Statement of Council's Responsibilities.

Our responsibility is to audit the financial statements in accordance with relevant legal and regulatory requirements and International Standards on Auditing (UK and Ireland).

We report our opinion as to whether the financial statements give a true and fair view and are properly prepared in accordance with Schedule 1, para. 16 of the Pharmacy Act 2007 and Generally Accepted Accounting Practice in Ireland. We also report to you whether in our opinion: proper books of account have been kept by the PSI; and whether the information given in the Council's Report is consistent with the financial statements. In addition, we state whether we have obtained all the information and explanations necessary for the purposes

of our audit and whether the PSI's balance sheet and its income and expenditure account are in agreement with the books of account.

We report if, in our opinion, any information specified by the Pharmacy Act 2007 regarding Council members' remuneration or Council members' transactions is not given and, where practicable, include such information in our report.

We review whether the Statement on the System of Internal Financial Control reflects the Council's compliance with the Code of Practice for the Governance of State Bodies 2009 and report any material instance where it does not do so, or if the statement is misleading or inconsistent with other information of which we are aware from our audit of the financial statements. We are required to consider whether the Statement on the System of Internal Financial Control covers all financial risks and controls, and to form an opinion on the effectiveness of the risk and control procedures.

We read the Council's Report and consider the implications for our report if we become aware of any apparent misstatements within it.

BASIS OF AUDIT OPINION

We conducted our audit in accordance with International Standards on Auditing (UK and Ireland) issued by the Auditing Practices Board. An audit includes examination, on a test basis, of evidence relevant to the amounts and disclosures in the financial statements. It also includes an assessment of the significant estimates and judgements made by the Council in the preparation of the financial statements, and of whether the accounting policies are appropriate to the PSI's circumstances, consistently applied and adequately disclosed.

We planned and performed our audit so as to obtain all the information and explanations which we considered necessary in order to provide us with sufficient evidence to give reasonable assurance that the financial statements are free from material misstatement, whether caused by fraud or other irregularity or error. In forming our opinion we also evaluated the overall adequacy of the presentation of information in the financial statements.

OPINION

In our opinion the financial statements give a true and fair view, in accordance with Generally Accepted Accounting Practice in Ireland, of the state of the PSI's affairs as at the 31st December 2010 and of its result for the year ended and have been properly prepared in accordance with the Schedule 1, para. 16 of the Pharmacy Act 2007 and Generally Accepted Accounting Practice in Ireland

We have obtained all the information and explanations we consider necessary for the purposes of our audit. In

our opinion proper books of account have been kept by the PSI. The financial statements are in agreement with the books of account.

In our opinion the information given in the Council's report is consistent with the financial statements.

Anne Brady McQuillans DFK
Chartered Accountants & Registered Auditors
Iveagh Court
Harcourt Road
Dublin 2

INCOME AND EXPENDITURE ACCOUNT

(FOR THE YEAR ENDED 31ST DECEMBER 2010)

	2010	2009
	€	€
Income	6,220,950	6,993,476
Operating and direct expenses	(5,369,034)	(5,372,878)
Operating Surplus	851,916	1,620,598
Interest receivable and similar income Interest payable and similar charges	70,943 (1,287)	37,706 (8,363)
Surplus on ordinary activities before taxation	921,572	1,649,941
Tax on ordinary activities	(29,104)	(13,143)
Surplus on ordinary activities after taxation	892,468	1,636,798
Surplus for the year Retained surplus brought forward	892,468 3,015,466	1,636,798 1,378,668
Retained surplus carried forward	3,907,934	3,015,466

The financial statements were approved by the Council on 24th March 2011.

BALANCE SHEET

(AS AT 31ST DECEMBER 2010)

2	2010	2009
•	€	€
Fixed Assets Tangible assets	4,244,815	4,389,835
Debtors 1. Cash at bank and in hand 8. —	2,985 108,601 3,114,789	11,620 223,827 6,774,813
8	3,226,375	7,010,260
Creditors: amounts falling due within one year	(6,392,643)	(6,635,550)
Net Current Assets / (Liabilities)	(1,833,732)	(374,710)
Total Assets Less Current Liabilities 6	5,078,547	4,764,545
Creditors: amounts falling due after more than one year	(1,009,279)	(587,745)
Net Assets 5	5,069,268	4,176,800
Income and expenditure	1,161,334 3,907,934	1,161,334 3,015,466
Closing Reserves 5	5,069,268	4,176,800

The financial statements were approved by the Council on 24th March 2011.

APPENDIX A

Attendance of Council Members in 2010

APPENDIX B

Attendance of Committee Members in 2010

APPENDIX C

Fees and expenses paid to Council Members in 2010

APPENDIX D

Operational Activity by Unit

ATTENDANCE OF COUNCIL MEMBERS IN 2010

Council Member	Date of Appointment	Expiry of Term of Office	No. of Meetings Attended
Council Members who were in office as a	at 31st December 2010		
Ms. Noeleen Harvey	22/05/2007	21/05/2011	7/7
Mr. Paul Fahey	22/05/2007	21/05/2013	7/7
Prof. June Nunn	22/05/2007	21/05/2011	5/7
Dr. Bernard Leddy	22/05/2007	21/05/2011	4/7
Prof. Paul Gallagher	22/05/2007	21/05/2011	6/7
Ms. Cathriona Hallahan	22/05/2007	21/05/2011	4/7
Mr. Stephen Boyle	21/05/2009	21/05/2011	5/7
Dr. John Hillery	06/02/2009	21/05/2011	5/7
Mr. Sean Hurley	22/05/2009	21/05/2011	1/7
Ms. Kate Mulvenna	02/03/2009	21/05/2011	7/7
Ms. Leonie Clarke	06/05/2010	21/05/2011	5/5
Mr. John Collins	22/05/2009	21/05/2013	5/7
Dr. Ann Frankish	22/05/2009	21/05/2013	6/7
Asst. Comm. Ms. Nóirín O'Sullivan	22/05/2007	21/05/2013	0/7
Ms. Rita Purcell	22/05/2007	21/05/2013	5/7
Ms. Ita Kelleher	22/05/2007	21/05/2013	6/7
Ms. Deirdre Larkin	22/05/2007	21/05/2013	6/7
Ms. Michelle Ní Longáin	22/05/2007	21/05/2013	5/7
Mr. Aidan Horan	22/05/2009	21/05/2013	6/7
Ms. Margaret Doherty	22/05/2009	21/05/2013	7/7
Mr. Eoghan Hanly	22/05/2009	21/05/2013	7/7
Council Members who were in office for	a period of 2010		
Mr. Darragh O'Loughlin	22/05/2007	26/04/2010	2/2

APPENDIX B

ATTENDANCE OF COMMITTEE MEMBERS IN 2010

CHAIRPERSONS COMMITTEE

	Expiry of Term of Office	Meetings Attended in 2010
Mc Cathriana Hallahan (Chair)	29/00/2011	2/5*
Ms. Cathriona Hallahan (Chair) Ms. Noeleen Harvey	28/09/2011	2/5* 4/5*
Mr. Paul Fahey	28/09/2011	3/5*
Ms. Rita Purcell	28/09/2011	4/5*
Dr. John Hillery	28/09/2011	4/5*
Prof. Paul Gallagher	28/09/2011	1/5*
Ms. Kate Mulvenna	28/09/2011	4/5*
Asst. Comm. Ms. Nóirín O'Sullivan	28/09/2011	0/5*

PROFESSIONAL DEVELOPMENT AND LEARNING COMMITTEE

Committee Member	Expiry of Term of Office	No. of Meetings Attended in 2010
Prof. Paul Gallagher (Chair)	28/09/2011	5/5
Ms. Ita Kelleher	28/09/2011	5/5
Ms. Michelle Ní Longáin	28/09/2011	4/5
Prof. June Nunn	28/09/2011	3/5
Mr. Stephen Boyle	28/09/2011	4/5
Ms. Margaret Doherty	28/09/2011	4/5
Dr. Tamasine Grimes	06/10/2012	5/5
Mr. Shaun Flanagan	06/10/2012	3/5
Ms. Pamela Logan	06/10/2012	3/5
Mr. Niall O'Shea	06/10/2012	3/5
Ms. Rita O'Brien	01/12/2012	4/5
Mr. Diarmaid Semple	01/12/2010	4/5

APPENDIX B

ATTENDANCE OF COMMITTEE MEMBERS IN 2010

REGISTRATION AND QUALIFICATION RECOGNITION COMMITTEE

Committee Member	Expiry of Term of Office	No. of Meetings Attended in 2010
Dr. John Hillery (Chair)	28/09/2011	3/3
Dr. Mike Morris	06/10/2012	1/3
Mr. Stephen McMahon	06/10/2012	3/3
Mr. John Collins	28/09/2011	2/3
Dr. Bernard Leddy	28/09/2011	3/3
Mr. Eoghan Hanly	28/09/2011	1/3
Mr. Cormac Deasy	19/01/2011	1/3

INSPECTION AND ENFORCEMENT COMMITTEE

Committee Member	Expiry of Term of Office	No. of Meetings Attended in 2010
Asst. Comm. Ms. Nóirín O'Sullivan (Chair)	28/09/2011	0/3
Ms. Deirdre Larkin	28/09/2011	1/3
Ms. Cathriona Hallahan	28/09/2011	1/3
Dr. Ann Frankish	28/09/2011	2/3
Mr. Eoghan Hanly	28/09/2011	3/3
Mr. Martin Higgins	02/03/2011	2/3
Dr. William Boles	28/09/2011	3/3
Ms. Leonie Clarke*	24/05/2012	1/1
Mr. Al Donnelly	29/09/2012	0/0
Mr. Darragh O' Loughlin*	26/04/2010	2/2
*Acted as Deputy Chair in 2010		

PHARMACY PRACTICE DEVELOPMENT COMMITTEE

Committee Member	Expiry of Term of Office	No. of Meetings Attended in 2010
Ms. Kate Mulvenna (Chair)	28/09/2011	6/6
Dr. Ann Frankish	28/09/2011	5/6
Mr. Stephen Boyle	28/09/2011	2/6
Ms. Margaret Doherty	28/09/2011	6/6
Ms. Ita Kelleher	28/09/2011	6/6
Ms. Michelle Ní Longáin	28/09/2011	4/6
Dr. Mark Ledwidge	06/10/2012	3/6
Mr. Jim Reilly	06/10/2012	5/6
Dr. Catriona Bradley	28/09/2011	3/6
Dr. Laura Sahm	06/10/2010	3/5
Ms. Claire Kerr	06/10/2010	4/5

ADMINISTRATION AND FINANCE COMMITTEE

Committee Member	Expiry of Term of Office	No. of Meetings Attended in 2010
Ms. Rita Purcell (Chair)	28/09/2011	5/5*
Mr. Darragh O'Loughlin	26/04/2010	2/2
Ms. Deirdre Larkin	28/09/2011	4/5*
Dr. Bernard Leddy	28/09/2011	0/5*
Mr. Sean Hurley	28/09/2011	1/5*
Ms. Ann Frankish	28/09/2011	5/5*
Mr. Aidan Horan	28/09/2011	4/5*
Ms. Leonie Clarke	24/05/2012	2/2
*One of these meetings was an informal meeti	ng as the Committee was not quorate	

APPENDIX B

ATTENDANCE OF COMMITTEE MEMBERS IN 2010

AUDIT COMMITTEE

	Term of Office	Meetings Attended in 2010
Mr. Ray Dolan (Chair)	10/12/2013	4/5*
Ms. Michelle Ní Longáin	10/12/2013	4/5*
Mr. John Gloster	02/03/2012	1/5*
Mr. Noel Conroy	02/03/2012	4/5*
Mr. Dermot Magan	28/09/2012	5/5*
Ms. Eugenie Canavan	28/09/2012	5/5*
One of these meetings was an informal meeting	ng as the Committee was not quorate	

APPENDIX C

FEES AND EXPENSES PAID TO COUNCIL MEMBERS IN 2010

Council Member	Gross Fees Paid in 2010¹ €	Expenses Paid in 2010² €
Council Members who were in office as at 31st December	2010	
Ms. Noeleen Harvey	7,732.60	366.38
Mr. Paul Fahey	4,970.96	787.74
Prof. June Nunn	N/A	86.83
Dr. Bernard Leddy	4,970.96	565.39
Prof. Paul Gallagher	4,970.96	
Ms. Cathriona Hallahan	4,970.96	
Mr. Stephen Boyle	13,070.96 ³	897.60
Dr. John Hillery	N/A	816.39
Mr. Sean Hurley	N/A	
Ms. Kate Mulvenna	N/A	
Ms. Leonie Clarke	5,326.034	
Mr. John Collins	4,970.96	2,803.05
Dr. Ann Frankish	N/A	
Asst. Comm. Ms. Nóirín O'Sullivan	N/A	
Ms. Rita Purcell	N/A	
Ms. Ita Kelleher	4,970.96	1,820.22
Ms. Deirdre Larkin	4,970.96	
Ms. Michelle Ní Longáin	4,970.96	
Mr. Aidan Horan	4,970.96	
Ms. Margaret Doherty	4,970.96	
Mr. Eoghan Hanly	4,970.96	
Council members who were in office for part of 2010		
Mr. Darragh O'Loughlin	N/A	2,185.17

¹Council Members fees paid from 22nd May to 31st December 2010. Fees paid to Council Members require the formal approval of the Department of Health and Children and the Department of Finance and are subject to income tax and all required statutory deductions.

² Expenses claimed for and paid by 31st December 2010 in line with Department of Finance circulars. The levels of payments relate to the base of the Council Member and the number of Council meetings, Committee meetings, other meetings (including national and international meetings) and training sessions attended.

³ Fee paid from 22nd May 2009 to 31st December 2010.

⁴Fee paid from 6th May 2010 to 31st December 2010.

APPENDIX D

OPERATIONAL ACTIVITY BY UNIT

PROFESSIONAL DEVELOPMENT AND LEARNING FUNCTION

PROFESSIONAL DEVELOPMENT AND LEARNING COMMITTEE: MEETINGS HELD

The Professional Development and Learning Committee held five meetings in 2010. The attendance records of these meetings are outlined in Appendix B. The Terms of Reference of the Committee are available on the PSI's website.

PROFESSIONAL DEVELOPMENT AND LEARNING UNIT		
OPERATIONAL OBJECTIVES FOR 2010	ACTIONS	METRICS/ ACHIEVEMENT
	BUSINESS PROCESSES	
1. To accredit the MPharm degree awarded on the successful completion of the interim National Pharmacy Internship Programme (NPIP) ⁵ at the Royal College of Surgeons in Ireland (RCSI) [ref. S. 7(2) of Pharmacy Act 2007].	Accreditation standards and process developed by expert group and approved by Council on 30th September 2010 following a public consultation process. Accreditation process ongoing.	Accreditation standards issued for public consultation in August/September 2010. MPharm Interim Accreditation Standards and Accreditation Process approved by Council on 30th September 2010. The composition of the accreditation panel was approved by Council at its meeting on 30th November 2010. Accreditation will be carried out mid- 2011.
2. To initiate the accreditation of the undergraduate pharmacy programme awarded by the RCSI to take place during the 2010-11 academic year [ref. S. 7(2) of Pharmacy Act 2007].	Council took the decision to postpone the accreditation of the undergraduate pharmacy programme awarded by the RCSI in line with the PSI (Education and Training) Rules 2008 which requires programmes to be reviewed at least once every five years (last accreditation visit took place in 2006). New accreditation standards and process to be developed in line with the recommendations contained in PEARs Report.	New accreditation standards (in line with recommendations in the PEARs Project ⁶) will be developed in early 2011. The accreditation process will take place in 2011.
3. To approve the RCSI's tutor pharmacist training and accreditation system [ref. Rule 19 of PSI (Education and Training) Rules 2008].	Within the context of the contractual arrangements with the PSI and the RCSI, a Steering Group was established by the RCSI in early 2010, involving PSI input to develop a new training programme for tutor pharmacists for delivery in the 2010-11 academic year that would address tutor requirements.	The Tutor Training and Accreditation Programme (TTAP) was approved by Council on 30th September 2010 and it went 'live' online on 8th October 2010. The TTAP was showcased at the official launch by the Minister for Health and Children of the Educational Reform Programmes on 15th October 2010.

⁵ The National Pharmacy Internship Programme (NPIP) is delivered by the RCSI on behalf of the Council of the PSI. The NPIP takes place during the fifth year of education and training to qualify as a pharmacist and comprises two components: (i) the in-service practical training programme and (ii) the Professional Registration Examination.

⁶ Pharmacy Education and Accreditation Reviews (PEARs) Project

PROFESSIO	DNAL DEVELOPMENT AND LEARN	NG UNIT
OPERATIONAL OBJECTIVES FOR 2010	ACTIONS	METRICS/ ACHIEVEMENT
	BUSINESS PROCESSES	
4. To establish the minimum standards for tutor pharmacists with regard to knowledge, skills and experience [ref. Rule 19 of PSI (Education and Training) Rules 2008].	The content of the TTAP and its assessment mechanism forms the basis of the minimum standards with further developments foreseen pending the introduction of a competency standard framework for registered pharmacists in 2011.	New tutor training and accreditation programme established and delivered.
5. To ensure the effective transition from the former pre-registration training system to the interim NPIP [ref. S. 7(1) of Pharmacy Act 2007].	Ongoing engagement with the RCSI in line with the contractual arrangements. An online application process was developed by the RCSI for roll-out for the 2010-'11 applicants for the NPIP. All applications for the NPIP 2010-2011 were processed in line with PSI (Education and Training) Rules 2008 with the RCSI managing the process and the PSI approving all applications.	Quarterly reports made to the Professional Development and Learning Committee and to Council. On 14th July 2010 the online application process opened for the 2010-2011 NPIP applicants to apply to the Registrar of the PSI. Breakdown of applications processed and approved: 12 Month Community 125 12 Month Hospital 24 6 Month Community/ 6 Month Industry 13 6 Month Community/ 6 Month Regulatory 3 6 Month Hospital/ 6 Month Community 1 Total No. of Applications 166 The first MPharm graduates were conferred on 18th November 2010.
	An appeals process under Rule 18 of the PSI (Education and Training) Rules 2008 was developed.	Appeals process approved by Council at its 30th September 2010 meeting. Training programme developed and delivered to the panel of appeals board members.
	Professional Registration Examination (PRE) held in May and in November 2010. November 2010 sitting managed by the RCSI on behalf of the Council of the PSI in line with contractual arrangements.	Twice annual statutory sittings held of the Professional Registration Examination.

OPERATIONAL OBJECTIVES FOR 2010	ACTIONS	METRICS/ ACHIEVEMENT
	BUSINESS PROCESSES	
6. To design and implement the remaining stages of the third country pharmacist qualification recognition process [ref. S. 16(2)(b) of Pharmacy Act 2007].	Stages 3 and 4 of the Third Country Qualification Recognition Process (TCQR), Adaptation Period and Professional Registration Examination (PRE) respectively were designed and implemented.	Four stages of the TCQR process are now developed and in operation. Equivalence Examinations held on 29th January and on 6th September 2010.
7. To ensure the effective processing of all applications received from third country qualified pharmacists for qualification recognition [ref. S. 16(2)(b) of Pharmacy Act 2007].	All applications received under the TCQR process are processed in accordance with the legislation.	Breakdown of applications processed through each stage of the TCQR process in 2010: Stage 1 A — Applications received, reviewed and qualification assessed 24 Stage 2 — Equivalence Examination 28 Stage 3 — Adaptation Period 35 Stage 4 – PRE 4 Appeals received 4
	LEARNING AND GROWTH	
1. To develop a training plan for staff of the Professional Development and Learning Unit that will facilitate the adoption of new work practices in line with the transition to new areas of responsibility.	Engaged with the external HR consultant to identify training needs of staff in the Unit. Development of a full training plan is in progress.	Programmes of training and development were undertaken by staff in the Unit in the areas of information compliance, database report generation, time management, Irish legislative process and best practice in public consultations.
To foster interactions with education/qualification-related staff from other healthcare regulators.	Collaborations initiated with other healthcare regulators and educationalists at home and abroad.	Development of working relationships and collaborations ongoing.

OPERATIONAL OBJECTIVES FOR 2010	ACTIONS	METRICS/ ACHIEVEMENT
	CUSTOMERS AND STAKEHOLDERS	
To consult with relevant stakeholders on Council approved recommendations arising from the PEARs Project.	Council consideration of recommendations contained in PEARs Report on 1st June 2010. The PSI carried out consultation and engagement meetings with over 30 stakeholders from June – December 2010.	Council approval of recommendation contained in the PEARs Report. Stakeholder meetings held. Launch by the Minister for Health and Children in October 2010 of the PEARs Report and its implementation.
2. To establish, manage and administer an implementation group for the new five-year programme and new accreditation standards. Output Description:	An Implementation Project Steering Group was set up by the PSI and is managed with the assistance of the PSI's change management advisers. A procurement process was also developed to procure the services of a Chairperson and Secretariat for the National Forum for Pharmacy Education and Accreditation. The National Forum is a key recommendation in the PEARs Report.	There were five meetings of the Project Steering Group in 2010, following its establishment in August 2010. A call for tenders for the Chairperson and Secretariat was published in the Official Journal of the European Union on 11th November 2010 and on the Irish Government's e-tenders website. The call for tenders closed on 21st December 2010. The procurement process will finish in early 2011.
3. To consult with relevant stakeholders on Council recommendations for the mandatory system of continuing professional development.	Comprehensive stakeholder consultation carried out as part of the development of the CPD model for consideration by Council. The PSI carried out consultation and engagement meetings with over 30 stakeholders from June – December 2010.	Consultation meetings held with stakeholders in early 2010. Stakeholder meetings held. Launch by the Minister for Health and Children in October 2010 of the CPD Report and its implementation.
4. To establish, manage and administer an implementation group for the mandatory system of continuing professional development.	An Implementation Project Steering Group was set up by the PSI and is managed with the assistance of the PSI's change management advisers.	There were five meetings of Project Steering Group in 2010, following its establishment in August 2010.

PROFESSIONAL DEVELOPMENT AND LEARNING UNIT		
OPERATIONAL OBJECTIVES FOR 2010	ACTIONS	METRICS/ ACHIEVEMENT
	RESOURCE MANAGEMENT	
1. To project manage the establishment of a new entity that will manage the functioning of the mandatory system of CPD [ref. S. 7(1) of Pharmacy Act 2007].	Council consideration of recommendations contained in the CPD Report on 1st June 2010. Developed the procurement process to procure the services of a Managing Body for the Institute of Pharmacy which will oversee, on behalf of Council, the operation and quality assurance of the CPD model.	Council decision to implement preferred CPD model and implementation planning. Call for expressions of interest (EoI) for the Institute of Pharmacy Managing Body were published in the Official Journal of the European Union on 19th November 2010 and on the Irish Government's e-tenders website. The EoI phase closed on 21st December 2010. The procurement process is expected to be completed in early 2011.
2. To manage Unit activities within allocated budget.	Managed 2010 allocated budget within parameters.	Budget requirements met.

APPENDIX D

REGISTRATION AND QUALIFICATION RECOGNITION FUNCTION

REGISTRATION AND QUALIFICATION RECOGNITION COMMITTEE: MEETINGS HELD

The Registration and Qualification Committee held three meetings in 2010. The attendance records of these meetings are outlined in Appendix B. The Terms of Reference of the Committee are available on the PSI's website.

OPERATIONAL OBJECTIVES FOR 2010	ACTIONS	METRICS/ ACHIEVEMENT
	BUSINESS PROCESSES	
 To review and revise the operation of the EU route application to register procedures. 	Commenced review with General System registration route; other systems to be reviewed in 2007 as staffing constraints impacted on the delivery of a complete review.	In progress - to be completed in 2011. Procedure in place to facilitate registration under S. 16 (5) of the Pharmacy Act 2007.
 To develop and implement procedures for the third country route application to register. 	Reviewed, developed and implemented procedure to facilitate registration under this route.	Three applicants successfully completed registration under S.16 (2)(b) of the Pharmacy Act 2007.
 To contribute to the development and roll-out of the enhanced ICT system for integrated registration functionality. 	Provided business process and procedure input to the ICT Unit in line with legislation and PSI policy and procedures, particularly in respect of continued registration process.	Completed development of renewals notification module and general enhancements to registration systems.
 To review and revise the application to restore procedure for pharmacists. 	Initial planning commenced.	In progress.
5. To carry out efficiently and effectively all Register-related procedures.	Managed and controlled the functions associated with registration in line with policies, procedures and legislative parameters.	First time registration - National route: 15 EU route: 11 Third country route: 3 Certificates of Current Professional Status issued: 99 Restorations to the Register: Pharmacists 12 Pharmaceutical Assistants 1 Voluntary cancellation and removal: Pharmacists 18 Pharmaceutical Assistants 16 Involuntary cancellation and removal: Pharmaceutical Assistants 16 Involuntary cancellation and removal: Pharmacists 16 Pharmaceutical Assistants 16 Pharmaceutical Assistants 16 Pharmaceutical Assistants 17

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PROFESSIONAL DEVELOPMENT AND LEARNING UNIT		
OPERATIONAL OBJECTIVES FOR 2010	ACTIONS	METRICS/ ACHIEVEMENT
	LEARNING AND GROWTH	
 To develop a training plan for staff of the RQR Unit that will facilitate the adoption of new work practices in line with the transition to an online environment. 	Worked with external HR consultant and individual staff members to identify training and development requirements.	Identification of courses to be completed in 2011. IT training completed in 2010.
To foster interactions with registration-related staff from other healthcare regulators.	Continued liaison with regulatory staff both nationally and internationally .	Participated in informal meetings of Competent Authorities in Ireland.
	CUSTOMERS AND STAKEHOLDERS	
 To increase the use of online- based registration activities by registrants. 	Worked with ICT and Communications and Public Affairs Unit to facilitate the use of online registration.	Uptake of 32% in the use of this facility in 2010.
2. To collaborate with the Health and Social Care Regulators' Forum and the Healthcare Professionals Crossing Borders initiative on the review of the Directive on Recognition of Professional Qualifications.	Continued participation in the activities of this forum.	Attended international meetings of Healthcare Professionals Crossing Borders (HPCB), and European Pharmacy Regulators. Ongoing participation in the review of Directive 2005/36/EC.
3. To answer queries in respect of registration.	The majority of queries and enquiries were answered within 24 hours, and the remainder in as prompt a time frame as possible, dependant on the particular query.	Circa 150 queries answered per month on an annual average basis.
	RESOURCE MANAGEMENT	
 To continue the development of web-based procedures for updating of the Registers that are integrated with the database. 	Liaised with ICT in the review of processes and procedures used and the support systems integrated into and provided by the database.	In progress - will continue to be progressed in 2011.
 To manage Unit activities within allocated budget. 	Managed 2010 allocated budget within parameters.	Budget requirements met.

APPENDIX D

INSPECTION AND ENFORCEMENT FUNCTION

INSPECTION AND ENFORCEMENT COMMITTEE: MEETINGS HELD

The Inspection and Enforcement Committee held three meetings in 2010. The attendance records of these meetings are outlined in Appendix B. The Terms of Reference of the Committee are available on the PSI's website.

OPERATIONAL OBJECTIVES FOR 2010	ACTIONS	METRICS/ ACHIEVEMENT
	BUSINESS PROCESSES	
 To assess compliance with and conduct inspections of retail pharmacy businesses under the Pharmacy Act and processes and procedures of the PSI. 	Pharmacy inspections/follow up visits. Specialist surveyor visits.	344 inspections/visits conducted. 773 specialist surveyor visits conducted.
2. To conduct investigations following receipt of information relating to suspected breaches of the Pharmacy and Medicines legislation and matters relating to applications for registration concerning possible breaches of S.63 and 64 of the Pharmacy Act and other related matters.	Undertake investigations under S.67 of the Pharmacy Act 2007 of matters brought to the attention of the PSI.	33 investigations initiated. 19 closed.
3. To undertake enforcement action in regard to matters such as advertising, internet pharmacy etc.	Undertake enforcement action following consideration of reports of authorised officers or matters brought to the attention of the PSI.	Complaints Following the report of an authorised officer complaints were initiated under S.71 of the Pharmacy Act 2007 as follows: • S.35 of the Pharmacy Act 2007, Retain Pharmacy Businesses: 2 complaint • S.36 of the Pharmacy At 2007, Pharmacists: 10 complaints.
4. To prepare investigation files for prosecutions taken by the PSI in the courts.	Eight prosecution files were prepared. One case was heard in 2010. The others are awaiting court dates.	Prosecutions The PSI instituted prosecution proceedings in eight cases during 2010. These summary proceedings were instituted under s.71 of the Pharmacy Act 2007. One case has been heard and the remainder are i process (awaiting court dates).

INSPECTION AND ENFORCEMENT UNIT		
OPERATIONAL OBJECTIVES FOR 2010	ACTIONS	METRICS/ ACHIEVEMENT
	BUSINESS PROCESSES	
5. To manage applications for registration, continued registration and changes to retail pharmacy businesses (RPB) in accordance with the pharmacy Act 2007, S.I. 495 of 2008 and the processes and procedures of the PSI. Includes new openings, transfer of ownership and transfer of premises.	The actions taken are listed in tabular format.	Applications for first time registration processed 43 Applications for first time registration as a result of relocation processed 10 Application for first time registration as a result of change of ownership processed 18 Application for restoration 1 RPB voluntary cancellation as a result of closure processed 38* RPB voluntary cancellation as a result of relocation processed 24* RPB voluntary cancellation as a result of change of ownership processed 27* RPB involuntary cancellation as a result of change of ownership processed 27* RPB involuntary cancellation processes 1 Superintendent, supervising pharmacist new notifications and updates processed 508 *Includes 41 previously carried over inactive RPB's which were formally signed off for removal from the Register in 2010
6. To maintain and audit the Register of RPB's.	An audit was initiated of all data relating to RPB's to ensure that data notified to the PSI is correct and reflected in the database of RPB's.	Audits of RPB files commenced 635. Audits of RPB files completed 403.
 To manage the development of an automated Inspection and Enforcement case management system (CMS). 	User specification for a CMS was developed in line with the processes and templates of Inspection and Enforcement.	Specification document completed and presented to the senior management team.
8. To assess the requirements and develop a pilot for an automated self-assessment system for RPB's and to conduct a pilot of the system.	Project initiated including consultation with stakeholders.	Ongoing.

THE PHARMACY REGULATOR

INSPECTION AND ENFORCEMENT UNIT		
OPERATIONAL OBJECTIVES FOR 2010	ACTIONS	METRICS/ ACHIEVEMENT
	LEARNING AND GROWTH	
 To develop a training syllabus for Authorised Officers (Inspectors). 	Training syllabus drafted.	Complete.
2. Deliver training programme for Authorised Officers (Inspectors).	Source appropriate training courses.	In progress.
	CUSTOMERS AND STAKEHOLDERS	_
To answer queries in respect of inspection and enforcement and the registration of RPB's.	The following queries regarding registration of RPB's were answered: • Email queries • Telephone queries Engage with other statutory and other agencies and bodies.	949 email queries received. 869 telephone queries received. The PSI continues to work effective with a wide range of stakeholders. The Unit also co-operates closely with the Health Information and Quality Authority (HIQA) particular with respect to the supply of medicines and services to residenti care homes. A representative from the PSI sits on the HIQA External Reference Group which meets quarterly. Regular contact is also maintained with the Pharmaceutical Society of Northern Ireland (PSNI) and the General Pharmaceutical Council of Great Britain.
	RESOURCE MANAGEMENT	
To manage Unit activities within allocated budget.	Managed 2010 allocated budget within parameters.	Budget requirements met.

APPENDIX D

PHARMACY PRACTICE DEVELOPMENT FUNCTION

PHARMACY PRACTICE DEVELOPMENT COMMITTEE: MEETINGS HELD

The Pharmacy Practice Development Committee held six meetings in 2010. The attendance records of these meetings are outlined in Appendix B. The Terms of Reference of the Committee are available on the PSI's website.

OPERATIONAL OBJECTIVES FOR 2010	ACTIONS	METRICS/ ACHIEVEMENT
	BUSINESS PROCESSES	
1. Review pharmacy practice in Ireland and provide a comparison with international practice to provide an evidence-base to inform strategies for the future development of pharmacy practice.	Develop methodology for survey of community pharmacy practice and international comparison research, with Horwath Bastow Charleton consultants under steering group. Draft report for Council.	Methodology for baseline survey of community pharmacy practice developed. Quantitative survey and qualitative interviews conducted over summer 2010. Draft final report on survey finding finalised December 2010.
2. Develop guidance with a view to facilitating compliance by pharmacists and pharmacy owners with the regulation of retail pharmacy business regulations.	Develop, issue for public consultation and publish guidance on requirements under the Regulation of Retail Pharmacy Businesses Regulations 2008.	Guidelines on Patient Consultation Areas in Retail Pharmacy Businesse issued for public consultation Marc 2010 and approved by Council May 2010. Guidance on safe supply of non- prescription medicines containing codeine finalised after public consultation in December 2009/ January 2010 and approved in principle by Council March 2010. Final guidance and implementation plan approved by Council May 2010 with implementation date of 1st August 2010. Draft guidelines on Sourcing, Stora and Disposal of Medicinal Products issued for public consultation August/September 2010. Initial drafting of guidelines on Premises and Equipment complete

PHARMACY PRACTICE DEVELOPMENT UNIT		
OPERATIONAL OBJECTIVES FOR 2010	ACTIONS	METRICS/ ACHIEVEMENT
	BUSINESS PROCESSES	
3. Development and implementation of guidelines on good pharmacy practice to address medication and patient safety issues.	Finalise guidance for pharmacists on safe supply of non-prescription medicines containing codeine. Develop guidance on the supply of medicines to patients in residential care settings/nursing homes. Develop guidelines on pharmacy closure/cancellation of registration. Develop guidance in relation to expiry date-checking of medicinal stock. Organise forum for discussion with superintendent pharmacists on patient safety and pharmacy practice issues, and development of resources for superintendents.	Final guidance issued June 2010 with formal implementation date of 1st August 2010. Practice Notice outlining legal requirements and professional obligations of pharmacists published July 2010. Interim guidelines issued March 2010 Guidance communicated to pharmacists on importance of policies and procedures on stock management and expiry datechecking October 2010. Series of nationwide meetings with superintendent pharmacists organised under joint taskforce with Irish Centre for Continuing Pharmaceutical Education (ICCPE), focussing on the role of superintendents and providing an opportunity for dialogue on key issues and development of CPD resources into future. Two meetings held November 2010 with further meetings re-scheduled into 2011. Initial development of project for online 'toolkit' and resources for superintendents with video presentation at development stage.
4. Support the implementation of medication safety initiatives arising from the report of the Commission on Patient Safety and Quality Assurance.	Participation in the Medication Safety Forum (MSF) chaired by Department of Health and Children Chief Pharmacist and leading on initiatives as appropriate.	Meetings of the MSF attended throughout 2010. PSI codeine guidance adopted as part of MSF work programme.

PHARMACY PRACTICE DEVELOPMENT UNIT		
ACTIONS	METRICS/ ACHIEVEMENT	
BUSINESS PROCESSES		
Attend meetings of the Committee and participate in the working group on the Development of Quality Indicators for Pharmaceutical Care.	Meetings and workshops attended throughout 2010.	
Plan the development of a core competency framework and international research.	Draft global competency framework developed by International Pharmaceutical Federation (FIP) Pharmacy Education Taskforce identified as potential mapping tool. Facilitation of pharmacy profession in Ireland to participate in international online survey on draft global framework.	
Support the National Pharmacy Reference Group (NPRG) established by Council in November 2010. Support the work of the HSE Clinical Strategy and Programmes Directorate (CSPD) (formerly known as Quality and Clinical Care Directorate).	Meeting of NPRG and HSE facilitated end November 2010. In partnership with HSE, facilitated call for expressions of interest from pharmacists to contribute to work of CSPD in disease management, which was advertised in December 2010.	
LEARNING AND GROWTH		
Identify training needs through discussion with staff and HR consultant.	Initial discussions on development of training programme held.	
Enable attendance at conferences, workshops and meetings, as appropriate.	Attendance at FIP 2010; meetings and workshops of Council of Europe Committee on Quality and Safety Standards in Pharmaceutical Practices and Pharmaceutical Care; meetings of Medication Safety Forum. Participation in HSE sub-group on medication management in designated centres for older people. Participation in Crisis Pregnancy	
	ACTIONS BUSINESS PROCESSES Attend meetings of the Committee and participate in the working group on the Development of Quality Indicators for Pharmaceutical Care. Plan the development of a core competency framework and international research. Support the National Pharmacy Reference Group (NPRG) established by Council in November 2010. Support the work of the HSE Clinical Strategy and Programmes Directorate (CSPD) (formerly known as Quality and Clinical Care Directorate). LEARNING AND GROWTH Identify training needs through discussion with staff and HR consultant. Enable attendance at conferences, workshops and meetings, as	

PHARMACY PRACTICE DEVELOPMENT UNIT		
OPERATIONAL OBJECTIVES FOR 2010	ACTIONS	METRICS/ ACHIEVEMENT
	CUSTOMERS AND STAKEHOLDERS	
1. Query Handling function.	Receive queries on practice issues in writing and handle within 7 days. Manage queries and requests for detailed advice related to the introduction of patient consultation areas and applications for exemptions from size requirement.	Circa 100 detailed queries answered per month received primarily by email from pharmacists, members of the public and other healthcare professionals and agencies. Interim query handling system established prior to development of new system in 2011. Requests for information or advice were received in relation to more than 200 retail pharmacy businesses in relation to meeting the requirement for a Patient Consultation Area which required an average of two hours' input per query.
2. Ensure any guidance documents drafted are issued for public consultation where necessary and publication communicated to pharmacists and other stakeholders.	Work with the Communications and Public Affairs Unit to coordinate public consultations and disseminate finalised guidance documents.	Three public consultations carried out on draft guidelines and guidance. Finalised documents published on PSI website, in PSI official publication and disseminated by email to all pharmacist and key stakeholders. Hard copy of guidelines on codeine and patient consultation areas sent to all retail pharmacy businesses.
	RESOURCE MANAGEMENT	
 To manage Unit activities within allocated budget. 	Managed 2010 allocated budget within parameters.	Budget requirements met.

APPENDIX D

FITNESS TO PRACTISE AND LEGAL AFFAIRS FUNCTION

FITNESS TO PRACTISE AND LEGAL AFFAIRS UNIT		
OPERATIONAL OBJECTIVES FOR 2010	ACTIONS	METRICS/ ACHIEVEMENT
	BUSINESS PROCESSES	
To complete the implementation of Part 6 of the Pharmacy Act 2007.	Ensure that all resources are in place to conduct hearings in accordance with requirements of the Act.	Forty three complaints were received during the year. In addition the Unit dealt with 175 concerns regarding either pharmacists or retail pharmacy businesses. These concerns were either dealt with by the Unit or referred to other units where appropriate. The Preliminary Proceedings Committee (PPC) had 6 meetings during the year.
2. To ensure that disciplinary committees operate in accordance with the Act and with fair procedures.	Schedule induction training and ongoing training of Council and disciplinary committees to meet specific requirements of individual committees and Council.	Training provided to Council, Preliminary Proceedings Committee, Health Committee and Professional Conduct Committee (PCC) on various dates throughout 2010.
	Develop and update procedures and processes where required in light of experience in 2009.	Procedures and processes of the PPC were reviewed during the year, resulting in improved administrative efficiency in the processing of complaints.
3. Establish internal liaison system with other Units in PSI to address issues and risks highlighted through the complaints process.	Ensure IT system captures issues highlighted and concerns raised in relation to registrants.	Pending the implementation in 2011 of a new case management system, concerns and formal complaints are monitored using an interim database.
	Ensure that IT system alerts other relevant Units when concerns are raised in relation to registrants.	Where appropriate concerns which are not referred into the part 6 process are referred at regular intervals to other Units for further processing.
	Weekly meeting with SMT to discuss concerns/issues raised.	SMT meetings are held weekly to discuss concerns/issues raised.
 Establish external liaison system with healthcare and other regulators to consider issues highlighted through complaints process. 	Continue to meet at regular intervals with appropriate representatives of other statutory bodies.	Forum established which is attended by those responsible for fitness to practise matters. Three meetings held in 2010. The forum considers matters of common concern to regulators in the area of fitness to practise. SMT regularly updated on issues raised.

OPERATIONAL OBJECTIVES FOR 2010	ACTIONS	METRICS/ ACHIEVEMENT
	BUSINESS PROCESSES	
5. Process all complaints efficiently in accordance with the Act and with fair procedures.	Develop administrative process and IT system to track complaints to ensure these are dealt with in a prompt manner.	Complaints are recorded in IT system and reviewed on daily basis. Complaints are processed as expeditiously as possible in accordance with the Act and fair procedures. A Memorandum of Agreement was entered into with the Irish Patients' Association who conduct regular audits of a random sample of complaints and concerns.
	Develop system to monitor compliance where conditions are attached to registration.	No conditions were attached to registration as a result of disciplinal proceedings during 2010. This issue will be addressed in the IT system due to be implemented in 2011.
	All complaints will be considered by PPC within 10 weeks of receipt. Complaints sent for mediation or for inquiry within 6 months of advice to Council from the PPC. These targets are subject to matters beyond the control of the PSI, e.g. judicial review proceedings.	Complaints are considered by PPC within an average time of 12 weeks following receipt of a complaint. Complaints referred to the Council by PPC are considered by Council within an average of 5-6 weeks from the date of referral by the PPC.
	LEARNING AND GROWTH	
Liaise with regulators in other jurisdictions in relation to best international practice.	Consult/Meet with counterparts in other jurisdictions.	Continue with ongoing liaison with other statutory bodies both nationall and internationally. Report to SMT every second quarter.
Ensure ongoing development and training of staff in Unit.	Review training requirements and update training schedule.	Unit staff had training in relation to dealing with the media, public speaking/presentation skills, priority management, Microsoft Outlook and minute taking. Staff also complied with relevant professional CPD requirements.

FITNESS TO PRACTISE AND LEGAL AFFAIRS UNIT		
OPERATIONAL OBJECTIVES FOR 2010	ACTIONS	METRICS/ ACHIEVEMENT
	CUSTOMERS AND STAKEHOLDERS	
1. Liaise with the Communications and Public Affairs Unit to inform stakeholders, including the public and the profession, in relation to the operation of the Fitness to Practise function and in relation to issues which arise in course of process.	Work with the Communications and Public Affairs Unit to produce relevant materials (e.g. guidelines for participants in complaints process, reports on complaints and concluded inquiries).	Updated guidelines for complainants prepared. The Unit contributed content for the development of the new PSI website. A number of circulars were sent to members of the profession during the year regarding issues highlighted in processing complaints and concerns.
Report to Minister in accordance with provisions of Part 6 Act.	Issue report to Minister where appropriate following conclusion of Part 6 process.	No matters arising from the complaints process required formal notification in 2010.
 Report to relevant statutory regulators where complaints process reveals concerns in relation to other healthcare providers. 	Establish mechanism for reporting to other statutory bodies engaged in the regulation of healthcare providers.	Matters were referred to the appropriate agencies including the Medical Council, HSE and HIQA in 2010.
	RESOURCE MANAGEMENT	
To manage Unit activities within allocated budget.	Managed 2010 allocated budget within parameters.	Budget requirements met.

APPENDIX D

ADMINISTRATION AND FINANCE FUNCTION

ADMINISTRATION, FINANCE AND CORPORATE GOVERNANCE COMMITTEE: MEETINGS HELD

The Administration, Finance and Corporate Governance Committee held five meetings in 2010. The attendance records of these meetings are outlined in Appendix B. The Terms of Reference of the Committee are available on the PSI's website.

ADMINISTRATION AND FINANCE UNIT		
OPERATIONAL OBJECTIVES FOR 2010	ACTIONS	METRICS/ ACHIEVEMENT
	BUSINESS PROCESSES	
To monitor and report on the financial performance of the PSI.	Enhanced management accounting reporting system developed.	Monthly reports to Registrar and SMT from March 2010. Quarterly reports provided to the Administration and Finance Committee and Council. 2011 draft budget prepared, togethe with detailed Unit breakdown.
2. To manage the PSI payroll system.	Payrolls for Staff, Committee and Council members prepared, approved and processed. Liaise with software suppliers, Revenue, Government Departments and Accountants.	12 monthly payrolls processed.
3. To manage the PSI's creditors payment system.	Process all invoices on time; liaise with creditors, staff, bank and accountants.	Weekly creditor's payment run.
4. To manage the PSI's Debtors system, cash assets and bank accounts.	 Invoices issued on time Funds invested prudently Funds properly dispensed Appropriate authorisations in place 	2,338 Invoices/Credit notes processed 1,051 Electronic payments made. 379 Cheque payments made. Bank accounts, current and deposit managed as per Council policy on external counterparty risk management.
5. To prepare and present the 2009 Annual Financial Statements (AFS).	Prepare the 2009 annual accounts for audit. Liaise with Auditors and arrange for interim and final audits.	Accounts prepared, audited and certified by external auditors, presented to Administration and Finance Committee and approved by Council. Submitted to Minister for Health and Children.
6. To prepare the 2010 financial accounts for interim audit.	Prepare the accounts for interim audit by the external auditors.	Interim Audit for 2010 undertaken in Quarter 4.
7. Manage and administer the PSI Superannuation Schemes.	Transfer contributions from staff salaries and employer to superannuation account.	Employee and employer superannuation contributions deducted and lodged monthly. Employer's contribution calculated and transferred monthly.

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ADMINISTRATION AND FINANCE UNIT		
OPERATIONAL OBJECTIVES FOR 2010	ACTIONS	METRICS/ ACHIEVEMENT
	LEARNING AND GROWTH	
To outsource or share services where practical and cost effective, in line with Government Directives.	Liaise with other organisations to pursue objectives.	High level discussions on-going. Internal procedures streamlined with view to ease of outsourcing if desired at a later date.
2. To develop staff in the Unit.	Attend training and development courses.	Staff member attended public procurement course.
	CUSTOMERS AND STAKEHOLDERS	
To encourage a high level of electronic transactions in all aspects of the PSI's business.	Encourage customers and creditors to use Electric Funds transfer (EFT).	52% of Fees received by EFT 79% of Creditors paid by EFT 67% of Travel and Subsistence paid by EFT in accordance with Department of Finance circulars All salaries are paid by EFT and in accordance with Department of Finance circulars.
	RESOURCE MANAGEMENT	
To manage PSI property so that it maintains and enhances its value.	Review estate management and maintenance of PSI properties.	Report from Architect approved by Council. Security enhanced at Shrewsbury Road. Improvements carried out at Shrewsbury Road.
To manage Unit activities within allocated budget.	Managed 2010 allocated budget within parameters.	Budget requirements met.

APPENDIX D

COMMUNICATIONS AND PUBLIC AFFAIRS FUNCTION

OPERATIONAL OBJECTIVES FOR 2010	ACTIONS	METRICS/ ACHIEVEMENT
	BUSINESS PROCESSES	
Development and launch of new PSI website.	Manage the re-design and re-development of new website, including updating and migration of content.	New website in place and launched December 2010.
Review and re-develop official publication.	Develop new publication once new website in place.	Initial planning for re-developed publication carried out.
3. Develop strategy for communicating to public and patients on key issues, in particular 'what to expect' from pharmacists, pharmacies and the PSI and information around complaints system.	Deliver a range of communication activities to ensure messages widely disseminated.	Updated website content tailored to facilitate public and patient access t key PSI information, including sectio on making a complaint. Draft content and design for public information material on 'what to expect' developed which will be promulgated under Patient Safety First initiative.
4. Develop strategy for effective communications and dialogue with pharmacists on key issues, in particular around CPD, practice guidance and patient/medication safety issues, and the fitness to practise system.	A range of communication activities, including meetings, consultation processes and publications delivered.	Enhanced content of new website to facilitate effective communication of and easy access to PSI information. PSI/ICCPE taskforce meetings with superintendent pharmacists organised in conjunction with Pharmacy Practice Development Unit. Significant patient safety or professional issues communicated be email to pharmacists. Public consultations conducted on practice guidelines and in relation to education standards. Pharmacy profession in Ireland facilitated in participating in international survey on draft global core competency framework in October 2010. PSI website and PSI publication, as well as media activity with other external pharmacy publications to engage profession.

COMMUNICATIONS AND PUBLIC AFFAIRS UNIT					
OPERATIONAL OBJECTIVES FOR 2010	ACTIONS	METRICS/ ACHIEVEMENT			
BUSINESS PROCESSES					
5. Develop strategy for effective communication and relationship building with other key stakeholders, including schools of pharmacy, student pharmacists, pharmacy and other healthcare professionals' representative bodies on key PSI activities and professional issues.	Work with other PSI Units to develop activities in relation to key stakeholder groups.	PSI website and official publication widely disseminated to stakeholders. Key stakeholders directly contacted on public consultation processes to maximise engagement. Meetings with students in three schools of pharmacy organised in conjunction with Professional Development and Learning Unit, including visit to University College Cork, School of Pharmacy led by the President.			
6. Develop strategy for effective communication with and building relationships with the Department of Health and Children, other relevant statutory bodies and regulators, the Oireachtas and policy makers.	Liaise with statutory sector to develop influencing capacity of PSI and build profile within statutory sector.	Attended meetings in conjunction with the Registrar's Office with key policy-makers, other statutory bodies, political system and dissemination of key communications.			
7. Build media relations and media profile of PSI.	Issue press releases and deal promptly with media queries.	Media coverage monitored to ensure key messages disseminated and to identify issues requiring intervention. All media queries dealt with within 24 hours. PSI participation in national TV news coverage and programmes, local and national radio coverage of a range of key issues.			

	OPERATIONAL OBJECTIVES FOR 2010	ACTIONS	METRICS/ ACHIEVEMENT			
LEARNING AND GROWTH						
1.	Ensure in-house users appropriately trained in the use of new website.	Work with website developer and ICT Unit on training programme for new case management system (CMS).	Three staff in-house trained in website CMS use.			
2.	Develop media skills of key PSI personnel to ensure competency of core spokespeople.	Media training carried out as necessary.	Media training conducted for Head of Fitness to Practise and Legal Affairs and refresher media training for Head of Communications. Refresher public speaking training carried out for the President. Provided training on media and public affairs to new Committee members.			
3.	Develop relationship with FIP on annual Congress to enhance structures in place for FIP 2013.	Attend FIP annual Congress. Facilitate planning for Dublin event.	FIP 2010 Congress in Lisbon attended. Meetings in Dublin with FIP and partners for FIP 2013 (Convention Centre Dublin and Custom Ireland) in September and ongoing liaison of planning issues.			
		CUSTOMERS AND STAKEHOLDERS				
1.	Ensure public information and awareness of PSI activities and that public/patients are supported in their requirements.	Manage queries from public in a timely manner, reflecting PSI values.	Queries from members of public dealt with urgently. New website developed to enhance public access to PSI information.			
2.	Ensure pharmacy profession and registrants kept informed of PSI activities and developments.	Use website, official publication, email alerts and meetings as required.	More than 40 email alerts sent to pharmacists on key issues arising. PSI official publication circulated to 5,000+ subscribers.			
3.	Ensure media kept informed of PSI activities and events.	Issue press releases and effectively manage public affairs.	Fifteen press releases issued in 2010 on key matters.			
4.	Ensure other key stakeholders kept informed of activities and developments.	Use website, official publication, meetings and consultations as required.	New website developed to enhance public access to PSI information. Key stakeholders included on official publication circulation list.			
		RESOURCE MANAGEMENT				
	To manage Unit activities within	Managed 2010 allocated budget	Budget requirements met.			



APPENDIX D

INFORMATION COMMUNICATIONS AND TECHNOLOGY FUNCTION

ICT UNIT						
OPERATIONAL OBJECTIVES FOR 2010	ACTIONS	METRICS/ ACHIEVEMENT				
BUSINESS PROCESSES						
 Commence development of systems to support the Fitness to Practise and Legal Affairs Unit incorporating complaints handling, case management and integration with registration systems. 	Work with Units on requirements.	Requirements specification for an organisation wide case management system, covering Fitness to Practise and Legal Affairs, Inspection and Enforcement, and general query management developed. Tender competition completed and bidder selected. Development work will be commenced in January 2011.				
Develop requirements for system to support the Inspection and Enforcement Unit.	Work with Unit on requirements.	Included in CMS.				
Progress self-assessment system for pharmacies.	Work with pharmacy representatives.	Not progressed pending development of CPD.				
 Develop online facilities for Council documentation enabling secure online access by Council members. 	Work with ICT support company and Registrar's Office.	Deferred pending development of Council Intranet and meeting document management system. iPad trial successfully completed November 2010 and will be used for meetings in 2011.				
5. Development of new PSI website.	Work with Communications and Public Affairs Unit and other Units on design and implementation.	New site completed, including new more user friendly domain name.				
6. Work to increase the use by registrants of new online facilities.	Work with Communications and Public Affairs Unit on research and promotion of online facilities.	Usability study completed and recommendations implemented. Use of online facilities increased from 24% in 2009 to 32% in 2010. Further improvements identified for implementation in 2011.				
7. Complete ICT infrastructure for Northumberland Road premises including links with Shrewsbury Road and also introduce enhanced facilities to enable smarter working and meeting handling.	Work with service providers and PSI Units on plan and implementation.	Completed.				
Complete development of renewals notification module to meet the requirements of the Rules and scheduling arrangements.	Work with the Registration and Qualification Recognition and the Administration and Finance Units on implementation.	Completed.				

OPERATIONAL OBJECTIVES FOR 2010	ACTIONS	METRICS/ ACHIEVEMENT
	BUSINESS PROCESSES	
 Implement general enhancements to Registration system e.g. automated SMS text alerts to Pharmacists/ Pharmacies. 	Work with Registration and Qualification Recognition and the Administration and Finance Units on implementation.	Completed.
io. Work with the Health Service Executuve (HSE) to enhance Pharmacy data on HSE Health Atlas.	Work with HSE, Health Information Unit.	Completed. PSI data on HSE Health Atlas enhanced which facilitates public access to pharmacy services (www.hse.ie/eng/services/maps)
11. To enhance reporting levels across the PSI by installing an integrated financial management reporting system.	Procure and implement system.	Finance Unit implemented routine financial management reporting system.
	LEARNING AND GROWTH	
To ensure users are appropriately trained in the use of ICT applications.	Undertake training needs analysis.	Training on ICT applications provided as required.
Enhance user skills on reporting and information extraction.	Deliver training programme.	Staff trained on reporting tool.
	CUSTOMERS AND STAKEHOLDERS	_
To provide ICT supports to the business functions of the organisation, the public and registrants.	Maintain ICT infrastructure and systems.	Functional and appropriate system in place to support PSI business.
To undertake new ICT initiatives to meet new functional requirements and support the implementation of new processes.	Initiate ICT projects.	ICT projects progressed satisfactori
3. To provide strategic ICT inputs to PSI Council and management.	Work with PSI management on innovative approaches to organisational developments.	Organisational developments underpinned by ICT.
 To work with external stakeholders in support of PSI patient safety agenda. 	Work with other organisations on ICT related matters including HSE Units etc.	Worked with external stakeholders as required.
	RESOURCE MANAGEMENT	
To ensure appropriate resources and skills are available for ICT developments.	Source skills and resources.	Mix of in-house and outsourced services in place as required.
2. To manage Unit activities within	Managed 2010 allocated budget	Budget requirements met.

NOTES	



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