

NATIONAL PHARMACY BOARD MEETING – Open Business

Minutes of the Open Business meeting held on Thursday 19 June 2025, at the Burlington Hotel, Birmingham, B2 4JQ.

English Pharmacy Board:

Adebayo Adegbite (AA), Claire Anderson (CA), Danny Bartlett (DB), Ciara Duffy (CD), Brendon Jiang (BJ), Sue Ladds (SL), Michael Maguire (MM), Ankish Patel (AP), Erutase (Tase) Oputu (TO) (Chair), Matt Prior (MP).

Scottish Pharmacy Board:

Jonathan Burton (JB) (SPB Chair), Lucy Dixon (LD) (remote), Laura Fulton (LF), Nicola Middleton (NM), Catriona Sinclair (CS), Amina Slimani-Fersia (ASF), Richard Strang (RSt), and Jill Swan (JS).

Welsh Pharmacy Board:

Geraldine Mccaffrey (GM) (WPB Chair), Eleri Schiavone (ES), Helen Davies (HD), Liz Hallet (LH), Rafia Jamil (RJ), Dylan Jones (DJ), Rhian Lloyd Evans (RLE), Aled Roberts (AR), Lowi Puw (LP), Gareth Hughes (GH)

Guests

BPSA President

In attendance:

Regina Ahmed (RA), Guidance Manager, Ross Barrow (RB), Head of External Affairs – Scotland, Karen Baxter (KB), Deputy CEO and MD, Pharmaceutical Press, Paul Bennett (PB), Chief Executive, Corrinne Burns (CB), PJ Reporter, Yvonne Dennington (YD), Business Manager – England, Amandeep Doll (AD), Head of Professional Engagement, Alwyn Fortune (AF) Policy and Engagement Lead – Wales, Elen Jones (EJ), Acting Director of Pharmacy, Iwan Hughes (IH) Head of External Relations Wales, Kellie King (KK), Scottish Clinical Leadership Fellow, John Lunny (JL), Public Affairs Manager – England, Fiona McIntyre (FM), Scottish Practice & Policy Lead, Joseph Oakley (JO) Associate Director of Assessment and Credentialing, Carolyn Rattray (CR), Business Manager - Scotland, Wing Tang (WT), Head of Professional Standards, Cath Ward, (CW) Business Manager – Wales, Laura Wilson (LW), Director for Scotland and Heidi Wright (HW), Practice & Policy Lead England.

RPS Member observers – 4 RPS member observers attended**Apologies:****EPB:** Sibby Buckle (SB), Ewan Maule (EM)**SPB:** Josh Miller (JM), Richard Shearer (RSh) and Audrey Thompson (AT).**WPB:** Richard Evans (RE)

25.06.NPB.01	Welcome and Apologies <i>Led by SPB Chair</i> The Chair welcomed Board members, staff and member observers to the meeting. Apologies were noted from: EPB: Sibby Buckle (SB), Ewan Maule (EM) SPB: Josh Miller (JM), Richard Shearer (RSh) and Audrey Thompson (AT). WPB: Richard Evans (RE)	SPB Chair
25.06.NPB.02	Declarations of Interests and Board Members' Functions and Duties <i>Led by: WPB Chair</i> <u>EPB, SPB, & WPB 02(a) - Declarations of interest</u> Board members noted papers 25.06.EPB/SPB/WPB/02(a). There were a number of updates to the EPB declarations of interest, from DB, MM and AP and one from the WPB from GM which were noted and will be updated for the website. Action 1: Business managers to update declarations of interest. <u>25.06.NPB.02(b) – Board Members' Functions and Duties</u> Board members noted the Board Members' Functions and Duties paper 25.06.NPB.02(b). The Chair reminded board members that the functions and duties contained in this paper will remain relevant as the organisation transitions into a Royal	SPB Chair

	College and Boards transition into Councils. Any comments on this paper should be channelled through the country directors.	
25.06.NPB.03	Minutes and Matters arising <i>Led by: SPB Chair</i> <u>Minutes</u> - The English Pharmacy Board approved the minutes of the English Pharmacy Board meeting, held on 26 February 2025. (25.06/EPB/03) Proposed by: Sue Ladds and seconded by: Danny Bartlett - The Scottish Pharmacy Board approved the minutes of the Scottish Pharmacy Board meeting, held on 28 February 2025. (item: 25.06/SPB/03) Proposed by: Richard Strang and seconded by: Jill Swan - The Welsh Pharmacy Board approved the minutes of the Welsh Pharmacy Board meeting, held on – 21 February 2025. (Item: 25.06/WPB/03) Proposed by: Lowri Puw and Seconded by: Helen Davies <u>Matters arising:</u> EPB and WPB: 25.02.EPB.09 Action 4 and 25.02.WPB.10: GPhC Assessing calculations for pre-reg. A paper authored by Helen Chang was circulated to all board members on Friday 13 June 2025 on this issue. GPhC are happy to engage with us. A consultation will be forthcoming and the RPS will be responding.	SPB Chair
25.06.NPB.04	Facilitated (Open) Sale of P Medicines <i>Led by: Policy Leads</i>	SPB Chair

	HW introduced this item recapping on the joint meeting of the Boards in June last year where the board came to a consensus on the way forward. The Science and Research team carried out a call for evidence. The final draft of the call for evidence report has previously been shared with joint boards but has not yet been published as it is currently under peer review pending publication. A draft position statement and accompanying guidance has been prepared following engagement with the GPhC, the RPS Community Pharmacy Expert Advisory Group (CPEAG) and other key stakeholders and has gone through a number of iterations. <i>(These papers were issued to Board members as part of the confidential business pack.)</i> The Board are asked for their approval in principle for the position statement and guidance to be published following any amendments which may arise from this meeting. The Board members were asked for their comments: - • The position statement is good, but the guidance could be more succinct in places. Review the wording around legislation and pharmacy teams • Suggested adding a table around risk assessment to use as a tool • Last sentence, around this model not being suitable for all pharmacies, should be at the beginning • Suggested adding a flow chart • The guidance does not allow for Responsible Pharmacists to overrule established practices that are in place to permit facilitated sale of P meds just because they personally do not agree with it – the guidance focuses on safe practice. After some discussion the boards agreed that the position statement should state that the RPS is supportive of these changes and no further changes should be made to the document in this context.	
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	The Boards agreed in principle to the position statement and guidance being published subject to review of the suggestions above. <i>(Some changes such as the addition of a flow chart may need to take place as later improvements following on from initial publication).</i>	
25.06.NPB.05	Supervision and Hub & Spoke <i>Led by: Heidi Wright & Wing Tang</i> WT said that this item will focus solely on Supervision (as the Hub and Spoke update was captured in the paper 25.06.NPB/10 (iv)), remarking the pharmacy profession has been having active discussions on this subject for the past 20 years or more. The paper (25.06.NPB.05) indicates that there is an expectation that the Department of Health and Social Care (DHSC) will imminently publish a long-awaited response to the Pharmacy Supervision consultation of 2023 alongside new draft legislation. This will set up a timetable for the law coming into force by the end of the year. The Boards are asked to consider the 3 points mentioned in the paper. WT highlighted that there are no other expected changes to Responsible Pharmacist regulations or remote supervision at this time although it is expected that in time the GPhC will consult on the RP regulations. Point 1: The Boards agreed to reaffirm the policy direction of the 2023 RPS consultation response and the 2025/26 GB workplan in relation to professional standards and guidance. There was some discussion regarding the point 2, target audience. There was general consensus that the target audience should be wider than RPS members and should involve the whole pharmacy team, and the guidance should be developed in collaboration with other pharmacy bodies.	SPB Chair

	There was further discussion on the future remit of a Royal College and public benefit. PB added to the debate regarding the principles of professional access versus public access and said that it would be for the RPS teams to operationalise resources as there are intellectual rights, artificial intelligence and the corruption and plagiarism of content to be considered when deciding on access to resources. It was highlighted that patient groups should be included in any collaborative work, and that it was a great opportunity to share our standards globally as other countries could utilise them. Point 3: After some discussion the Boards agreed to replace a 2005 Law and Ethics bulletin which described characteristics of supervision, with a new description of supervision, produced in collaboration with GPhC and other key bodies. It was suggested that the description should be enabling and supportive and should not be overly prohibitive. The Chair thanked WT for his presentation of the item.	
25.06.NPB.06	Health Inequalities <i>Led by: Amandeep Doll</i> AD gave a short presentation reflecting back to the Boards the information and reflections she had gathered from them since the Board meetings in February. Focusing on Health Inequalities has been a commitment of the Boards since Covid and currently as the RPS transitions to a Royal College. All 3 countries have national policies relating to Health Inequalities. AD recapped in the slides on work that has already gone on over the past 5 years and said it was now time to identify where the gaps are. As a Royal College the RPS needs to lead in the area of Health Inequalities to create change. Similar to the Inclusion and Diversity workstream this area will have an overarching strategy with focused campaigns that include patient and professional elements, and there needs to be a research element to all our work in this area which will commence with a literature search. Initially there is a need for a position statement, building on from the thought leadership piece we already have, to aid advocacy and lobbying. There are also plans in place to	SPB Chair

	create a landing page on the website to bring all information relating to Health Inequalities together. The Boards had a lengthy discussion on what more could be done in this area which included looking at initiatives that would have the greatest impact on the largest number of patients, quality improvement, evaluation of data and patient demographics. It was suggested that RPS guidance documents should undergo impact assessments through the patient lens. It was noted that Wales is to become the first <i>Marmot</i> nation in the world, with health inequalities work being rolled out across the Welsh Health Boards. This work is strongly aligned with the future generations work which also maps to the RPS Vision work in Wales. Action 2: AD undertook to reflect on today's meeting discussions and bring a proposal forward for the Board meetings in September. The Chair thanked AD and encouraged all to register and attend the ABCD meeting on Tuesday 24th June which will focus on disabilities.	
25.06.NPB.07	Policy Updates <i>Led by: Fiona McIntyre and Heidi Wright</i> Workforce FM gave a short presentation advising that preparation work has begun on scoping out the potential workplan for the Workforce "hot topic" over the 2025/26 period. This has included analysis of internal and external pharmacy workforce policy and associated activity, analysis of activities related to workforce qualitative and quantitative data and stakeholder feedback. It was proposed that workforce policy activity is not a hot topic but a fundamental function of RPS. The boards noted that other influencing factors included	WPB Chair

	• Long Term Plan (England) • National Workforce Forum (Scotland) • Strategic Pharmacy Workforce Plan (Wales) • UK Pharmacy Professional Leadership Advisory Board There was a discussion on the suggestions that the Annual WWB Survey could be adapted to achieve alternative data sets. There was a lengthy discussion around the identified gap in policy on education and credentialing, and a need for credentialing pathways for non-patient facing pharmacy roles, and how RPS could make it relevant and more inclusive in a community pharmacy setting. AI guidance for the workforce was noted as a missing piece. FM updated the boards that a recent Digital Innovation and Education Roundtable was hosted by RPS, and those findings would be used to build on the policy work and products and services. Action 3: FM undertook to reflect on today's meeting discussions and bring plans to the September meeting. Cancer Plan HW summarised previous board discussions, discussions with BOPA and all the collaborative work. The boards noted that BOPA and RPS are keen to work together to maximise use of pharmacy teams to get best outcomes for patients. BOPA have developed a vision so needs to align with that. Early diagnosis and community pharmacy could be a potential area of exploration and this fits in with the Care Closer to Home agenda. The boards also noted a project was underway to update the 6th Edition of the Quality Assurance of Aseptic Preparation Services (QAAPS). The National Cancer plan in England will be published in 2025.	
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	EJ reported that a partnership had been agreed with Macmillan to co-host a clinical fellow who will work on this policy area, ensuring patient and carer input. Boards were asked for their comments • Need to ensure that patients have equal access particularly with high-cost medicines eg CAR-T cell therapy. There needs to be a wraparound service for all • More work is needed around the Daffodil Standards - AF advised that the Palliative End of Life Care refreshed document, which is now a GB publication would be published imminently. • There is pressure on Aseptic units where there are recruitment and retention issues • There are issues around the use of unlicensed medicines • There are opportunities for early detection in Community Pharmacy Action: HR to reflect on the discussions and feedback to boards.	
25.06.NPB.08	Women's Health Update <i>Led by: Kellie King</i> KK gave a presentation on the scope and background of the project for Women's Health referring to the National Strategies in Wales, Scotland, England and Northern Ireland. KK shared the findings of the Review of "Women's Health Study a review of menopause service provision by Pharmacists which she has undertaken on behalf of RPS. The recommended amendments to the position statement on women's health were suggested in the following key areas: Collaboration Engaging with Patients - Royal College status Interventions/Opportunities Education Empower workforce to have confidence, skills and knowledge to deliver WH service.	WPB Chair

	Emerging role of digital healthcare/AI. Sustainability Comments from the Boards:- • The boards were pleased with the review and said that it was a thorough, evidence-based review. • This is a perfect opportunity for Community Pharmacy to intervene to provide a consistent approach • There is funding available and this needs to be accessed • Patients matter and who does what in this space must be easily signposted to get support from the right practitioners at the right time.	
25.06.NPB.09	Constitution & Governance update <i>Led by Karen Baxter</i> KB talked about the progress of the three milestones for the programme and the activity since the Special Resolution Vote (SRV), following on from the detailed discussions at the working day. The boards noted the milestone activities still to be carried out were:- Milestone 2 • creation of the subsidiary • target September 2025 (definition) • operational date tbc (year end?) Milestone 3 • becoming the Royal College of Pharmacy	WPB Chair

	• target April 2026 The boards noted, with regards to Milestone 3, the 12 broad categories of activity required are: - Focussed on the operational detail of shaping the organisation as a charity: • Leadership functions e.g. ensuring all our deliverables as a charity have an 'owner' • Operational alignment with charitable status e.g. back-office functions and membership offer positioning • Preparing for final applications • Privy Council • Charities Commissions • HMRC KB advised that the creation of the publishing subsidiary is moving at pace, and it is necessary to look to ensure that the finances flow well and operationally the right balance is needed between the Subsidiary and the Charity in terms of the costs and how these impacts on people and jobs. In terms of the implementation of the Royal College of Pharmacy, a detailed piece of work needs to be carried out on the Regulations. The boards have previously provided feedback that more information needs to be communicated to members.	
25.06.NPB.10 (i) - (vii)	Papers for noting (item: 25.06/NPB/10 (i-vii)) <i>Led by: WPB Chair</i> Board members noted the following papers: (i) Implementing Country Visions (ii) Professional Issues (iii) Workforce (iv) Strengthening Pharmacy Governance	WPB Chair

	(v) Education (vi) Science & Research update (vii) Assisted Dying										
25.06/NPB/11	Any other business <i>Led by: WPB Chair</i> <u>EPB Casual Vacancies</u> It was noted that the English Pharmacy Board have agreed not to fill the 2 casual vacancies that have occurred.	WPB Chair									
25.06/NPB/12	Proposed dates for future meetings in 2025 <i>Led by: WPB Chair</i> <table border="0"> <tr> <td>England</td> <td>Scotland</td> <td>Wales</td> </tr> <tr> <td>23 & 24 Sept</td> <td>17 & 18 Sept</td> <td>25 & 26 Sept</td> </tr> <tr> <td>6 Nov</td> <td>6 Nov</td> <td>6 Nov</td> </tr> </table>	England	Scotland	Wales	23 & 24 Sept	17 & 18 Sept	25 & 26 Sept	6 Nov	6 Nov	6 Nov	WPB Chair
England	Scotland	Wales									
23 & 24 Sept	17 & 18 Sept	25 & 26 Sept									
6 Nov	6 Nov	6 Nov									
25.06.NPB/13	Close of Open Business The meeting concluded at 12.40pm and members observers were requested to leave the meeting.										

Action list:

Item	Action	By whom	Open/Closed/Comments
25.06.NPB.02	Action 1: Declarations of Interest: update declarations of interest	Business managers	Open

25.06.NPB.06	Action 2: AD undertook to reflect on today's meeting discussions and bring a proposal forward for the Board meetings in September	AD	Open/September
25.06.NPB.06	Action 3: FM undertook to reflect on today's meeting discussions and bring plans to boards.	FM	
25.06.NPB.06	Action 4: HR to reflect on the discussions and feedback to boards.	HW	