

Monday 23 October 2023

# Open Letter to the UK Pharmacy Professions

**From the Independent Chair of the UK Pharmacy Professional Leadership Advisory Board and the UK Chief Pharmaceutical Officers**

## **Announcement of the open recruitment for Independent Expert Members for the Advisory Board**

The UK Chief Pharmaceutical Officers (CPhOs) are delighted to announce the establishment of the UK Pharmacy Professional Leadership Advisory Board and appointment of Sir Hugh Taylor as its Independent Chair.

It's also a great pleasure to launch the [open recruitment](#) nine Independent Expert Members to join the Board, individuals who will play a pivotal role in shaping and supporting its work. Today, we've published a recruitment pack which outlines how these important roles are open to leaders of the highest calibre with an outstanding track record in, strong understanding of, or lived experience in, health and care in any country of the UK. The recruitment will close at **23.59 on Monday 13 November 2023**. Please do share these opportunities widely.

Establishment of the Board as the vehicle for greater collaboration across the UK pharmacy professional leadership bodies (PLBs) and specialist professional groups (SPGs) over a three-year period initially was the principal recommendation of the [UK Commission on Pharmacy Professional Leadership's report](#), published in February 2023.

Since then, the CPhOs have taken the required steps to constitute the Board as an independent, advisory public body and establish a clear remit for its work. The process for its establishment has taken some months and the CPhOs would particularly like to thank the PLBs and SPGs involved and pharmacy professionals across the UK for their ongoing support for the work. Now that the Board has been established as an independent public body by the CPhOs, they will become its advisors and the Independent Chair will take lead responsibility.

All organisations that are part of the Board will be equal partners and be represented by their President, Chair or equivalent. Throughout the development process we have discussed the formation of the Board with the PLBs and SPGs involved.

## **Rationale**

As the independent UK Commission report outlined, there is an urgent need for the pharmacy professions to work collaboratively to deliver on their potential, and address together a wide range of professional issues. These include the development of independent prescribing as part of the initial education and training for pharmacists, with thousands of newly-registered pharmacist independent prescribers joining the workforce every year from three years' time, and an expansion of the clinical role of pharmacy technicians. It will be important to build and maintain the confidence of professionals and the public in these new roles and competencies, to ensure we bring people with us.

Setting up the Board is an important initiative that will further enable and empower the PLBs and SPGs to shape and lead the future for the pharmacy professions.

## **Independent body**

To ensure it can carry out its remit effectively and guide future-focused leadership for the pharmacy professions, the Board has been established by the Department of Health and Social Care as an independent public body with 19 members. Working within its remit, the Board will set its own agendas and provide advice to the PLBs and SPGs, which are its constituent members. The advice the Board provides is to be impartial. The UK CPhOs may also seek expert advice on professional leadership from the Board, as well as from PLBs via existing arrangements.

## **Role and purpose**

Facilitated by the Independent Chair, and supported by Independent Expert Members with outstanding leadership capabilities, the Board will lead the delivery of an ambitious vision set out by the UK Commission:

- (i) Supporting and enabling collaborative working
- (ii) Developing credible and authoritative leadership that is effective and speaks with one voice to Government, regulators, patients, employers and others in the public interest
- (iii) Developing the future arrangements for UK pharmacy professional leadership, that will contribute to the ambition to realise the future potential of pharmacy professionals in the NHS and other settings.

With respect to its ways of working, governance, accountability and reporting arrangements, the Board will have a robust, federated professional leadership framework in place to ensure objectives are delivered.

## **Open recruitment of Independent Expert Members**

We are now seeking nine Independent Expert Members through an open recruitment. This will ensure the Board is broad, balanced and ensure appropriate diversity. We will seek Expert Members able to represent the patient and public interest, with expertise in leadership, education, research and academia, as well as experience beyond the pharmacy professions. The recruitment of pharmacy technicians and practising community pharmacy professionals will be addressed through this recruitment.

## **Future state**

The creation of the Board will support and steer a process of evolution for pharmacy professional leadership in the UK, matching the speed of change in healthcare and pharmacy professional practice more widely. It is ultimately for members of the professions and the bodies that represent them to determine the form and structure in the longer term.

The initial challenge is to build trust, bring the PLBs and SPGs closer together in areas such as leadership, governance, representation and culture, foster collaboration and develop parity of esteem between the two professions. Clearly to do this the Board will need to establish a relationship of trust and collaboration from the outset and this will be a key focus of the early work.

Please see the further information provided as an Annex. We will share a further update once the Independent Expert Members have been appointed.

We look forward to the new independent Board engaging with pharmacy professionals across the UK to champion a new and dynamic phase of collaboration. We hope pharmacists and pharmacy technicians across all four countries will join with us to create this positive future.

Best regards

A handwritten signature in black ink, appearing to read 'Hugh Taylor'.

Sir Hugh Taylor  
Independent Chair



Andrew Evans  
Chief Pharmaceutical Officer for Wales



Cathy Harrison  
Chief Pharmaceutical Officer for Northern Ireland



Alison Strath  
Chief Pharmaceutical Officer for Scotland



David Webb  
Chief Pharmaceutical Officer for England



# Annex: Further information

## Objectives and remit of the Board

1. In keeping with the recommendations in the UK Commission's report, the Board will have two high-level objectives:
  - To develop and oversee a three-to-five-year programme to implement the five key recommendations of the UK Commission.
  - To support and steer the transition to a sustainable and effective structure of pharmacy professional leadership across the UK.
2. The five UK Commission recommendations which form the remit of the Board are:
  - a) **Leadership, policy and professionalism:** To convene a transitional, collaborative Pharmacy Leadership Council tasked with developing an inclusive federation involving existing UK pharmacy professional leadership bodies and specialist professional groups, with an independent chair and other expert members:
    - The Board will lead delivery of the UK Commission on Pharmacy Professional Leadership's vision and recommendations for the benefit of patients and the public.
    - This professional leadership framework will include robust processes for governance and accountability, and outline a clear identity for the federation and its unique proposition and goals.
  - b) **Regulatory support:** Through the Board, continue to facilitate the development of professional standards to support the practice of pharmacy to develop in the public interest, with standards on professional values and behaviours a priority.
    - PLBs and SPGs are expected to have a 'duty to collaborate' with each other and the regulators and to manage conflicts of interest effectively.
    - The development of standards would include a process to quality assure, accredit, update or endorse professional standards including standards developed by special interest groups or faculties.
  - c) **Regional, country and international relations and engagement:** Through the Board, lead an approach to develop a coordinated and authoritative voice for pharmacy professional leadership, enabling federation members to work together to support and develop greater engagement with priority audiences including:
    - Patients, the public, governments and third parties.
    - Pharmacy PLBs and SPGs and individual pharmacy professionals across all career stages.

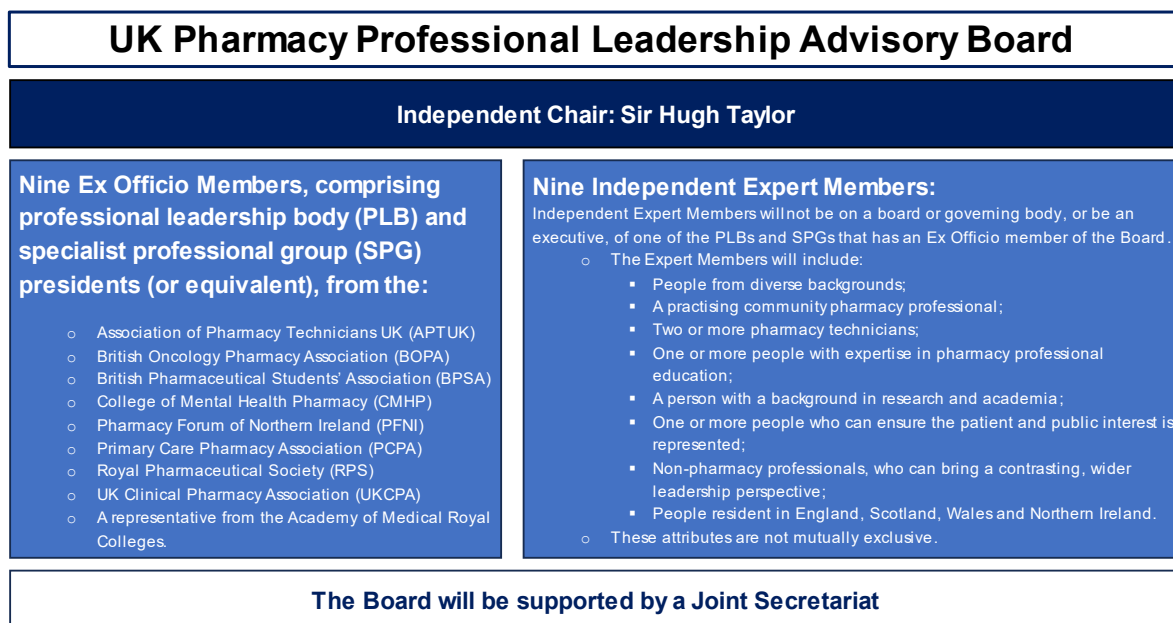
- Across countries (including internationally) and with other professions.

- d) Scope of practice for future pharmacy professionals:** Through the Board, enable PLBs and SPGs to be aspirational for and optimise the contribution of pharmacy professionals, supporting the vital role and expertise of pharmacy professionals in the safe and effective use of medicines, promoting excellence, and championing research, clinical academic development, innovation and the development of new areas of practice, and supporting their adoption.
- This includes putting in place the infrastructure to keep abreast of current and emerging research, medicines and practice; and commissioning scopes of practice, best practice standards and guidance.
  - The work would need to include and represent the diversity of patient- and non-patient facing practice within the professions across the continuum of pharmacy and medicines practice, supported by visible role models.
- e) Professional education and training:** Through the Board, contribute to the collaborative development of aligned UK curricula for post-registration education and training for integrated pharmacist and pharmacy technician practice.
- This will include: post-registration practice standards; credentialing or its equivalents, linked to the further development of career pathways including specialisms; and an assessment process aligned to current and future service need.
  - There is a need to facilitate a UK educational infrastructure to support recording and assessment of post-registration education and training activities for pharmacists and pharmacy technicians and ensure equity of access for both professions to enhance professional mobility.

## Composition

3. To keep the size of the Board to a reasonable footprint in the first instance we have included those bodies which were members of the Commission and its working groups, with the additional inclusion of the British Oncology Pharmacy Association.
4. PLB and SPG members comprise organisations that have as their primary purpose one or more professional leadership functions for a group of pharmacy professionals for the benefit of patients and the public. Patients and the public are at the centre of what the PLBs and SPGs do – whether in promoting and helping to assure excellence and safe practice, or in understanding what the respective professions contribute to society.
5. This is reflected in the way in which PLBs and SPGs constitute themselves, how they work and how they hold themselves accountable. They have to demonstrate that they are working for the interests of the patient and the public, and not

promoting the profession in ways detrimental to those interests, and that they are representative of the whole profession, and not one section within it. Finally they have to avoid being captured by vested interests which – though legitimate in themselves – are the province of other bodies



## Accountability

6. The Board is to be established as a Public Body, in keeping with Cabinet Office Guidance<sup>1</sup>, as a Non-Administratively Classified Government Entity akin to an Expert Committee.
7. The Board will report through the Independent Chair to the four UK CPhOs, as government officials, and on to their respective government departments. The independent Chair will also report to the PLBs and SPGs that form the Board.
8. The Independent Expert Members will report to the Independent Chair of the Board.
9. The Ex Officio Members will provide a communication link between the Board and the PLBs and SPGs and the Board will be accountable to the professions via the PLBs and SPGs.
10. This arrangement will enable organisations to work together effectively, while maintaining their separate identities and undertaking their own activities

---

<sup>1</sup> [Cabinet Office - Public Bodies Handbook - Part 1](#): The Board is a Non-Administratively Classified Government Entity akin to an expert committee.

independently. The Board will ensure a single authoritative voice for the pharmacy professions when needed on professional leadership.

## **Role and Responsibilities of Members of the Board**

11. The role of the Chair is to lead and steer the Board, provide leadership, support and guidance to the organisations involved, and enable collaborative delivery of the UK Commission's recommendations and remit of the Board.
12. Independent Expert Members will draw on their particular areas of leadership expertise, knowledge and skills, and credibility demonstrated through lived experience, which can be applied in one or more of the following areas:
  - Leadership, policy and professionalism
  - Regulatory support
  - Professional education and training
  - Regional, country and international relations and engagement
  - Scope of practice of future pharmacy professionals.
13. As Independent Expert Members, they should not be on a board or governing body, or be an executive, of one of the PLBs and SPGs that has an Ex Officio member of the Board.
14. Ex Officio members will bring the perspective of the professional leadership organisation they represent to the considerations and activities of the Board,
15. Board members will be expected to demonstrate the highest standards of corporate and personal conduct in line with principles set out in the Code of Conduct for Board Members of Public Bodies, which includes the Nolan Principles regarding conduct in public life.

## **Appointments process**

16. As recommended by the UK Commission, the appointments process for the Independent Chair and Independent Expert Members of the Board is led by the CPhOs and gives due consideration to how the Board communicates and works effectively at a UK level, and across country and regional levels. The UK Commission report recommended that they, as heads of profession across the four UK nations, make the appointments given their recognised professional leadership role and to ensure independence. The aim is to create the best environment so that PLBs and SPGs focus on and develop stronger effective arrangements for professional leadership to enable delivery of better outcomes for patients.



17. To achieve its purpose at pace, and provide the PLBs and SPGs with support to collaborate effectively, the CPhOs made a direct appointment of the Independent Chair.
18. The appointment of Sir Hugh Taylor was officially made by the CPhOs on 13 October 2023. He is currently also Chair of the Health Foundation and a Trustee of Cicely Saunders International, and Chief Negotiations Adviser (Voluntary Pricing and Access Scheme for branded medicines), Department of Health and Social Care. He was previously Chair of Guy's and St Thomas' NHS Foundation Trust, King's College Hospital NHS Foundation Trust, The Christie NHS Foundation Trust and National Skills Academy for Health, and a Trustee of Macmillan Cancer Support, the Nuffield Trust and the Royal College of Physicians.

## **Funding**

19. The CPhOs are funding the following: remuneration for the Independent Chair and Independent Expert Members and a proportion of the Secretariat. In addition, they are resourcing the establishment of a website for the Board.
20. The UK Commission report made some recommendations on resources on Page 52 which may be considered and discussed by the Board.

## **Stakeholder forum**

21. The formation of the Collaborative Stakeholder Forum outlined in the UK Commission's report would need to be discussed by the Board. The UK Commission recommended that it involve other groups such as trade bodies, trade unions, regulators, education bodies and patient representative bodies.