

# Consultation on the draft 2011 Fees Rules for the General Pharmaceutical Council

## Response from the Institute of Pharmacy Management International Ltd.

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Please indicate all the countries to which your comments relate  
Great Britain

### Are you responding

On behalf of an organisation  
on behalf of a pharmacy organisation (please complete section B)

### B. Pharmacy organisations

If you are responding on behalf of a pharmacy organisation, please supply the following details

#### Type of organisation

- Other (please give details)  
*IPMI is a Company limited by guarantee offering educational and professional support to its 300 members. Most are pharmacists in community practice but there are members from most spheres of practice in the UK and beyond who are interested in pharmacy management*

#### Area of work

Community pharmacy  
Hospital pharmacy  
Primary care  
Pharmacy education and training  
Pharmaceutical industry

**More than one area** / Other (please give details)

*Most members are pharmacists in community practice but there are members and associates from all the above spheres of practice and more such as NHS managers, veterinary pharmacy, legal advisers business consultants and more in the UK and beyond who are interested in pharmacy management.*

### Question 1

Do you agree with the principle that the premises fees we set should cover the costs associated with the regulation of pharmacy premises?

*Yes we support this proposal, but also expect this should also contribute significantly to developing reserves given current levels and more demanding premises inspections*

### Question 2

Do you agree with the proposed increase in premises fees which will enable us to apply a consistent approach to Controlled Drug monitoring in Great Britain?

*Yes we support the proposal which should ensure the premises fee covers entire costs of CD monitoring in registered pharmacies. Whether this allows a consistent approach everywhere is difficult to quantify at this stage and will depend largely on Accountable Officers. It is also important that all pharmacies registered or not comply to the same standards.*

### Question 3

Do you agree with our intention for the fees we set to be more closely related to the cost of the activity?

*This would seem to make sense, but it is difficult to see how fees for pharmacists should be almost double that of technicians when the registrar's activities for both are virtually identical.*

*Fees would thus seem to reflect ability to pay based on salary. Given that premises fees reflect a turnover of 25 – 250 times the professional fee, the level of this fee is well out of line with professional fees.*

*It is interesting to see Nurses and HPC registrants pay only 25% of the pharmacist fee and we look forward to more affordable fees in future.*

**Question 4**

Do you agree that we should not offer a low income fee?

*We agree that you should not offer a low income fee..*

**Question 5**

Do you agree with the proposed additional fee for those pharmacy professionals who choose to pay by quarterly direct debit?

*Yes, from a registrants perspective, but there could be problems for an employer should debits fail for example if registration is terminated outside the annual renewal date. Keeping details of employees' registration dates will also be a major challenge when these are scattered throughout the year and could lead to an increase in staff continuing to practice after registration has terminated, thereby increasing public risk.*

**Question 6**

Additional comments

**“GPhC wishes to establish a reasonable level of reserves during our first few years of operation.”**

*Pharmacists have already paid for providing a reasonable level of reserves for RPSGB, and to do this for a second body seems unfair especially as fees have not fallen though reserves have built up. Given the separation was a Governmental decision we suggest they should make a significant contribution to this fund.*