National Pharmacy Advisory Council Open Business meeting – 4 June 2026

Present

England: Claire Anderson (CA), Sarah Baig (SB), Aisling Considine (AC), Mildred Johnson (MJ), Sue Ladds (SL) Claire Nevinson (CN), Tase Oputu (TA), Mahendra Patel (MP) **(Chair)** Katherine Pearson (KP), Bruce Warner (BW), Joseph Williams (JW)

Scotland: Jonathan Burton (JB), Lucy Dixon (:D), Paul Forsyth (PF), Laura Fulton (LF), Kellie King (KK) (on line), Josh Miller (JM) Catriona Sinclair (CS) **(Chair),** Jill Swan (JS), Audrey Thompson (AT)

Wales: Sarah Brown (SH), Clare Clement (CC), Helen Davies (HD), Liz Hallett (LH) **(Chair),** Gareth Hughes (GH), Amy Jayham (AJ), Dylan Jones (DJ), Aled Roberts (AR)

Staff: Staff: Karen Baxter (KB) CEO, Ross Barrow (RB) Public Affairs Manager Scotland, Elspeth Boxall (EB) Clinical Fellow (Scotland), Corrine Burns (CR) News Correspondent for the Pharmaceutical Journal, Yvonne Dennington (YD) Business Manager for England, Amandeep Doll (AD) Director for England, Alwyn Fortune (AF), Practice and Policy Lead for Wales, Iwan Hughes (IH) Public Affairs Manager Wales, John Lunny (JL) Public Affairs Manager England, Fiona McIntyre (FM) Practice and Policy Lead for Scotland, Geraldine McCaffrey (GM) Director for Wales, Carolyn Rattray (CR) Business Manager for Scotland, Laura Wilson (LW) Director for Scotland, , Heidi Wright (HW), Practice and Policy Lead for England (on line),

Invited Guests: Justine Scanlan (starting in post as the Director of Pharmacy on 29 June 2026)
Faith Adebimpe
Kay Bhatara

Royal College of Pharmacy member observers: one member attended

Apologies: **England:** Ciara Duffy (CD)
Scotland: no apologies
Wales: Eleri Schiavone (ES)

Item No	Minute	Chaired
26.06.NPAC .01	**Welcome** The Chair welcomed all to the first formal meeting of the Council. **Apologies** Apologies were received from:- EPAC: Ciara Duffy WPAC: Eleri Schiavone	**SPAC**
26.06.NPAC 02	**Declarations of Interests** Council members **noted** papers 26.06.NPAC.02(E/S/W). Council members were asked to forward any changes to declarations of interest to their Business Managers. YD reported that she had received an update from CA. LF gave a declaration of interest for item 7 – she had been a former Director for Scotland for the GPhC. **Action 1:** Declarations of Interest to be updated by Business Managers	**SPAC**
26.06.NPAC 03	**Minutes and Matters arising** **English Pharmacy Advisory Council** <u>Minutes</u> The English Pharmacy Advisory Council **approved** the minutes of the English Pharmacy Board meeting, held on 25 February 2026. (paper: 26.06.NPAC.03) <u>Amendments</u> There were no amendments. **Proposed by:** Sue Ladds and **seconded by:** Tase Oputu	**SPAC**

	Matters arising and actions: Action1 - closed Action 2 – GB workplan – on the agenda for today – remains open Action 3 – open – bring back to a future meeting Action 4 – Closed **Scottish Pharmacy Advisory Council** Minutes The Scottish Pharmacy Advisory Council **approved** the minutes of the Scottish Pharmacy Board meeting, held on 25 February 2026 (paper: 26.06.NPAC.03), subject to the following amendment – page 8 CPD should read CD. **Proposed by:** Audrey Thompson and **seconded by:** Jill Swan Matters arising and actions: Action 1 – ongoing Action 2 – closed Action 3 – closed Action 4 - closed **Welsh Pharmacy Advisory Council** Minutes The Welsh Pharmacy Advisory Council **approved** the minutes of the Welsh Pharmacy Board meeting, held on 25 February 2026 (paper: 26.06.NPAC.03) Amendments There were no amendments.	

	Proposed by: Gareth Hughes and **seconded by:** Aled Roberts Matters arising and actions: Action 1 – closed Action 2 – Closed Action 3 – closed Action 4 - closed	
26.06.NPAC 04	**Code of Conduct** **Council members noted paper 26.06.NPAC.04.** The Chair introduced this item saying that the policy has already been reviewed by the Trustee Board and that comments are being invited from Council members before finalising the policy. Council members were broadly in agreement with the policy, there was a short discussion and some of the points raised were:- • The inclusion of the word fairness – not everyone agreed with this as "fairness" can be subjective • UK to be changed to GB (as policy does not include NI) **Action 2:** KB to update policy with GB	**SPAC**
26.06.NPAC 05	**Campaigns and Political Activity Policy (Lobbying Policy)** **Council members noted paper 26.06.NPAC.05.** The Chair introduced this paper and asked for comments from Council members. There was some discussion from Council members and some of the points raised were :-	**SPAC**

	• Always adhering to taking a neutral political stance and being evidence based – this is also a requirement of having Charity status. • The policy does not cover any guidance on when elected members cease to be an elected member – KB gave assurance that this has been picked up when reviewing the draft and is being worked on. • Council members need to be clear on which ‘hat they are wearing’ and when and clearly state that - this needs to be clear in the policy – it is recognised that Council members are often employed by other organisations. **Action 3**: Policy to be reviewed to include points about what happens when Council members cease to be elected members and also to be clear on whether the person is acting as a Council member or as a representative of another organisation.	
26.06.NPAC 06	**Aesthetics – draft position statement** **Council members noted paper 26.06.NPAC.06.** The Chair introduced this item saying that the purpose of this item was to seek Council members’ views and feedback on the draft updated position statement on Aesthetic Practice and Pharmacy. Elspeth Boxall, the Scottish Pharmacy Clinical Leadership Fellow will describe the reasons why this position statement update has been prioritised and the methodology used. The paper states 3 areas for consideration. The position statement was first published in 2019 and since then there has been a lot of changes in this area – i.e. government legislation, regulatory guidance updated, expanding industry and the potential for an increasing number of pharmacists getting involved in this area of practice. The methodology involved a literature search, stakeholder engagement, focus groups, questionnaire, which has culminated in this first draft.	**EPAC**

	Some key themes have emerged from the stakeholder engagement:- lack of standardisation of training, lack of training, complications management, delegation and remote prescribing and planning for emergency situations. EB highlighted the key recommendations from the draft and asked for feedback from Council members. Council members had a lengthy discussion on this issue and some of the points raised to be considered were:- • General agreement with the key recommendations but some areas need to be strengthened - Clearer that pharmacists are responsible for complications management - Need to be over 18 to undergo procedures • Premises are a grey area – re CQC and GPhC – needs to be strengthened – there are certain practices that cannot be undertaken – should policy state "only in a clinical environment"? • Try to align new legislation with Scottish legislation • Is there a plan to expand on this work as it is a growing area? • More focus needed on risk assessment – put at front of statement • Link everything to professional judgement and standards • Include what is mandatory and what is recommended • Ensure practitioners do not only do initial education and training – it is about continued learning and ongoing assessment of competency • Position statement is not patient/public focused – could there be a summary that talks directly to patients/public? • Be more explicit around anaphylaxis – but there is a problem around stock holding • Take a more holistic view around safeguarding and mental health • Does the Royal College need to do additional work around this, i.e. identifying gaps and any further work that might be required?	

	LW added that we are hoping to publish the revised statement and work with The Joint Council for Cosmetic Practitioners (JCCP) in identifying any gaps. This is the start of this work to ensure pharmacists work as safely as they can for patient and public benefit. EB and LW clarified that the scope of this work was to update the College's position statement on Aesthetics, any requests for additional work in this area will need to be considered as part of the work planning process later in the year. The Chair thanked Council members for their comments and engagement in this topic and said that the position statement will be strengthened based on those comments to make it more rigorous with a focus on informed consent, risk assessment and safety, whilst keeping in mind how these procedures are advertised with a view to psychological harm and vulnerable patients. The Chair thanked EB for her presentation. Action 4: EB to review and update draft position statement based on feedback from Council members, to be signed off by Council Chairs over summer. National Directors to bring Council member proposal for additional work on Aesthetics back to NPACs as part of work planning cycle in September/November 2026.	
26.06.NPAC 07	**GPhC Consultation response on International Education and Training** **Council members noted paper 26.06.NPAC.07.** The Chair introduced this item saying the purpose was to seek the Councils' views and feedback for inclusion into the Royal College's consultation response. Views will also be sought from a wide range of stakeholders. Two guests were invited to give their views to help given some background, they were Faith Adebimpe(FA) and Kay Bhatara(KB) (online).	**EPAC**

	AF and FMc introduced the item setting out the proposals from the GPhC consultation. An overview of the current route to registration was given which involves 4 stages over two years and the proposed 3 stage route which is reduced to one year and now includes independent prescribing. FA was requested to give feedback on her work with internationally trained pharmacists. She said there had been a conference a week ago where discussion took place and some of the things discussed had been around:- - Maintaining patient safety - The one-year route is highly appreciated but prescribing adds another layer of responsibility - Queries around integration gap - Lack of direction and point of contact for support - Financial pressures – lack of support – put at risk of exploitation by employers who offer the visa - Poor return on investment - Workplace dissatisfaction and isolation (different system in NHS – no support) - Lack of sense of professional belonging (employers do not help with this) - Language barriers – interpretation - Mentors for IP KB said she was a OSPAP provider at Aston University and explained that:- - Numbers are growing – 4 years ago there were 35 on the course – two years later doubled to 70 and last year was 140 – so there is demand for the programme - An impact of the change could be a reduction in numbers as placements need to be arranged - Lots to include in one year including IP – both practice and academic study - Financial implications could be significant for students – programme does not attract funding, and inclusion of additional clinical placements will increase costs - Study currently allows students to work a part time job whereas a one-year course would not allow time for this – financial implications	

	- Students can already have significant commuting time and costs to university and to placements, which may not be close to where they live. This burden may in increased under the proposal. - Two-year course is already very intense Council members added their comments to what was presented:- - The new proposal will do a disservice to students, will add additional financial pressures and does not offer flexibility - Medical colleagues have a structured training pathway with supervision - Agree current system needs to change but the proposal including IP is too much – no reason why IP cannot take place at a later date - Support is needed – it is hard to find placements for our own university students – including IP is probably too much in one year - Cost of commuting can be an issue especially in Wales and Scotland - There might be alternative models to consider – need to think of scenarios - Could be similar to the apprenticeship model - Questions around the validity check – who is doing the mapping? - DPP availability is an issue - Do not understand what the driver for change is – what problem needs to be fixed? – not feasible to incorporate two years into one and add prescribing – patients need to be kept safe and that cannot be done by lowering the bar. - There are points that need addressing by employers - This strategy will add risk - Pathways need to be established before introducing additional prescriber. - Public confidence needs to be considered. - Consultation is a confusing and ambiguous document – top down rather than bottom up approach – if studies are not completed are there financial penalties? - Cannot ignore 'domino effect' – especially around supervision The Chair thanked all for their input into this discussion. The team will collate the points made to formulate a robust and concerning response to the consultation including points	

	made on validity checks, availability of DPPs, public safety, cost implications for students, equity and fairness, and employers role in supporting transitional experience. Any further comments/thoughts to be fed back to AF and FMc before 21st July and to share widely among colleagues and help encourage a stronger objection. A meeting with the GPhC would help in developing the response. FMc added that she has spoken with some senior pharmacists during stakeholder engagement who do support the change. **Action 5:** Policy leads to utilise feedback from the NPACs in formulating the College's response to the GPhC Consultation response on revised standards for the education and training of internationally-qualified pharmacists, due 21st July 2026. Further comments to be fed back to AF and FMc before 21st July,	
26.06.NPAC 08	**Papers for noting** **Council members noted papers 26.06.NPAC.08.** (i) Implementing country visions (ii) Professional Issues (iii) Workforce (iv) Strengthening Pharmacy Governance	**EPAC**
26.06.NPAC 09	**Any other business** JM highlighted that in Scotland there had been a MSP motion to formally recognise the Royal Pharmaceutical Society's transition into the Royal College of Pharmacy. JM congratulated the Scotland team in achieving this recognition for the Royal College.	**EPAC**

26.06.NPAC 10	**Key points for reporting to Royal College Members– standing item** The 3 key points to highlight from today's meeting to the members were discussed to be:- Aesthetics - strengthening the statement with risk/advertising issues/ongoing degree of assessment/looking at vulnerable patients/looking at harm issues and our ongoing work with JCCP GPhC consultation - robust Council discussion, there will be wide stakeholder engagement/ response will be of good quality - confirmed growing area of concern and will include the patient safety angle Recognising that at this first meeting there was a change in focus - public and patient safety as a cornerstone of what was discussed	**EPAC**
26.06.NPAC 11	**Date of next meetings** **EPAC:** 22/23 September and joint meeting on 5 November (day before RCof Pharm annual conference) **SPAC:** 16/17 September and joint meeting on 5 November (day before RCof Pharm annual conference) **WPAC:** 24 September and joint meeting on 5 November (day before RCof Pharm annual conference)	**EPAC**

Action List

Previous actions from February 2026	**Action**	**By whom**	**Comments /open/closed**
EPB	**Action 3:** Country Teams to do some more work in this area (Foundation numbers) and bring a paper back to the next meeting.		**Open – will bring back to a future meeting when more information is available**
Actions from June 2026			
26.06.NPAC 02	**Action 1:** update decs of interest	**Bus Managers**	**Open**
26.06.NPAC 04	**Action 2:** Code of Conduct Policy: KB to update policy with GB	**KB**	**Open**
26.06.NPAC 05	**Action 3**: Campaigns and Political Activity Policy: to be reviewed to include points about what happens when Council members cease to be elected members and also to be clear on what hat Council members are wearing.		
26.06.NPAC.06	**Action 4:** EB to review and update draft position statement based on feedback from Council members, to be signed off by Council Chairs over summer. National Directors to bring Council member proposal for additional work on Aesthetics back to	**EB/LW**	**Open**

	NPACs as part of work planning cycle in September/November 2026.		
26.06.NPAC.07	**Action 5:** Policy leads to utilise feedback from the NPACs in formulating the College's response to the GPhC Consultation response on revised standards for the education and training of internationally-qualified pharmacists, due 21st July 2026. Further comments to be fed back to AF and FMc before 21st July,	**Policy Leads**	**Open**