1 May 2024 - FINAL

UK Pharmacy Professional Leadership Advisory Board

Terms of Reference

1. Introduction and background

1. The overall purpose of professional leadership is to influence, promote, and support the delivery of the highest possible standards of professional practice to continually drive up the quality of patient care. Building on this, the four UK chief pharmaceutical officers (CPhOs) established an independent UK Commission to produce a blueprint, describing the purpose, functions, governance and design for professional leadership in pharmacy, to enable and support pharmacy professionals to carry out their roles effectively.

2. This was against a background of significant changes impacting on the professions including:

    - Expanding clinical roles and greater professional autonomy for pharmacy professionals in the NHS.
    - New initial education and training standards for pharmacists, which mean they will be independent prescribers from day one of registration from 2026.
    - Regulatory and legislative changes that will impact on pharmacy professional practice.
    - The potential of legislative changes to increase the contributions of pharmacy technicians to patient care and service delivery.
    - The development and impact of data and technology on the delivery of health care.

3. Strong, effective, well trusted and highly respected professional leadership is required to guide, support and enable these transformational changes that will impact on patients, the NHS and others. The right professional support must be in place for the professions, working with the professional regulators and Governments. It is also required to ensure pharmacy professions can maximise their contribution to the development of relevant Government policies and to delivering care in a safe and effective way.

4. There are clear distinctions between professional leadership of the professions as a whole and professional representation of particular sectors or groups, and between professional regulation and the leadership of professional excellence.

2. Findings of the UK Commission

5. The UK Commission reported in February 2023[1] and made five key recommendations in order for pharmacy professional leadership bodies to deliver the functions to meet their key purpose. In terms of "Next Steps" the UK Commission reached the following conclusions.

6. It became clear during the UK Commission's discussions that no single body has the membership support, role, authority, resources or capacity to adequately meet the requirements of the recommendations. But the professional leadership bodies (PLBs) and specialist professional groups (SPGs) certainly do have the potential to collaborate to do so, and, with the support of independent members, to work together to achieve a credible, authoritative pharmacy professional leadership function.

7. The UK Commission was mindful that structural change always brings with it costs and the risk of creating a distraction from improvements on the ground. Equally, previous attempts at collaborative leadership had not been effective although the evidence from the pharmacy professions themselves was that greater collaboration was essential. Therefore, the recommended approach is oversight of, and support for, a transitional process to be completed within a defined period of time.

8. The UK Commission therefore proposed the creation of a collaborative pharmacy leadership council (now known as the UK Pharmacy Professional Leadership Advisory Board (UKPPLAB)) with an independent, appointed Chair and a balance of pharmacy professional leadership and independent members with clear and defined goals, working within a federated professional leadership framework to enable the pharmacy PLBs and SPGs to enhance collaboration between themselves and with the regulators, and others, while maintaining their individual identities. This would facilitate the implementation of all the recommendations in the UK Commission's report within three to five years and enable the PLBs and SPGs to determine their future form.

9. To reflect the need to preserve individual identity, the Board will need to begin as a formal collaboration of pharmacy professional leadership organisations, rather than a merger or a pooling of resources. The UK Commission expressed the view that all current pharmacy PLBs and SPGs which become involved will need to review their current governance arrangements to ensure they are compatible with the characteristics of pharmacy PLBs as described by the Commission, and to incorporate the Board's role. There also needs to be a robust system or body in

[1] Report of the UK Commission on Pharmacy Professional Leadership, published 6th February 2023

place to ensure effective engagement with other stakeholder organisations, for instance a collaborative and inclusive Stakeholder Forum.

3. Rationale

10. 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 2026, 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 they have the widest support.

11. 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. The aim is to create the best environment so that PLBs and SPGs focus on and develop strong effective arrangements, including an authoritative, non-statutory voice, for professional leadership to enable delivery of better outcomes, in the interests of patients and the public.

4. The role of the UK Pharmacy Professional Leadership Advisory Board (UKPPLAB)

12. The Board has two key tasks:

    A. To develop and oversee a three-to-five-year work programme to implement the five key recommendations of the UK Commission.

    B. To support and steer the transition to a sustainable and effective structure of pharmacy professional leadership across the UK.

13. The UK Commission's recommendations were in respect to:
    - Leadership, Policy and Professionalism
    - Regulatory Support
    - Regional, Country and International Relations and Engagement
    - Scope of Practice for Future Pharmacy Professionals
    - Professional Education and Training

    These are reproduced in **Annex A**, together with the options considered by the UK Commission for the structure of pharmacy professional leadership.

5. Status and Accountability

14. The Board is established as a Public Body, in keeping with Cabinet Office Guidance[2], as a Non-Administratively Classified Government Entity akin to an expert committee. The advice provided is to be impartial and apolitical. The Board is independent of but established by a government department without separate legal personality. As such, ultimately formal accountability for the Board to parliament is through ministers, exercised in practice by a reporting line through the Independent Chair to the four UK CPhOs and on to their respective government departments.

15. Given the responsibility of the Board to facilitate the strengthening of pharmacy professional leadership through the collaboration of the PLBs and SPGs to implement the UK Commission Report, formally the Independent Chair will also report to the PLBs and SPGs that form the Board. On a day-to-day basis, communication between the Board and the PLBs and SPGs will be through their respective representative on the Board.

16. The Board will begin as a formal collaboration of pharmacy PLBs and SPGs, and will be accountable to the pharmacy professions via the PLBs and SPGs. This arrangement will enable organisations to work together effectively, while maintaining their separate identities and undertaking their own activities independently. The Board will seek to enable the pharmacy professions to speak collectively with a single authoritative voice on professional leadership when needed.

17. Working within its remit, the Board will set its own agendas and provide independent advice to the PLBs and SPGs which are its constituent members. In addition, the Board, led by the Independent Chair, will respond in a flexible and agile way to additional requests from the UK CPhOs for expert advice on professional leadership.

18. With respect to its ways of working, governance, accountability and reporting arrangements, it will have a robust federated professional leadership framework in place to ensure objectives are delivered. All organisations, which are part of the federation, will be equal partners and have representation on the Board through their president (or equivalent), having their views and opinions considered in the development of common goals.

[2] https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/519571/Classification-of-Public_Bodies-Guidance-for-Departments.pdf
Cabinet Office - Public Bodies Handbook - Part 1: The Board is a Non-Administratively Classified Government Entity akin to an expert committee.

6. Duration

19. The Board is established initially for a period of three years, with the option to extend this period as necessary to deliver the Board's remit.

7. Membership

20. In keeping with the status of the Board as a Public Body, appointment of members to the Board will be the responsibility of the four UK CPhOs, as government officials. This also reflects the recommendations of the UK Commission Report. The Independent Chair will be involved in the appointment of the other members. The Independent Chair and other appointed members will initially serve for 18 months and three years respectively. Ex officio members will serve while they hold the relevant post.

21. The Board membership will comprise:

- An Independent Chair – appointed;
- Ex Officio Members comprising PLB and SPG presidents (or equivalent) from the Association of Pharmacy Technicians UK (APTUK), British Oncology Pharmacy Association (BOPA), College of Mental Health Pharmacy (CMHP), Pharmacy Forum of Northern Ireland (PFNI), Primary Care Pharmacy Association (PCPA), Royal Pharmaceutical Society (RPS) and UK Clinical Pharmacy Association (UKCPA), and a representative of the British Pharmaceutical Students' Association (BPSA), a representative from the Academy of Medical Royal Colleges (AoMRC) and the Chair of the Patient and Public Reference Group to the UKPPLAB;
- Independent Expert Members – appointed:
    - As Independent Expert Members, they will 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;
    - To achieve an inclusive, diverse, balanced Board appointment of the Independent Expert Members will seek to address a range of attributes including:
        - People from diverse backgrounds;
        - A practising community pharmacist;
        - Two or more pharmacy technicians;
        - One or more people with expertise in pharmacy professional education;
        - A person with a background in research and academia;
        - One or more people who can ensure the patient and public interest is represented;

        - Non-pharmacy professionals, who can bring a contrasting, wider leadership perspective;
        - People resident in England, Scotland, Wales and Northern Ireland.
    - These attributes are not mutually exclusive.

22. One of the three CPhOs for Great Britain (in rotation), the CPhO Northern Ireland and the Senior Professional Advisor for Pharmacy Technician Practice at NHS England will attend meetings and act as advisers to the Board. An observer from each of the government policy teams will be invited to observe the Board's work.

8. Meeting Frequency and Attendance

23. The Board is expected to meet four times a year, each time for most of a day.

24. All members are expected to attend Board meetings. By exception and with the agreement of the Independent Chair, on occasion, where necessary, Ex Officio Members may arrange for a substitute to attend, so that their organisation is represented.

25. Observers may attend meetings by invitation only, with the agreement of the Independent Chair. At the discretion of the Independent Chair, an observer may be asked to speak. This may be to impart information, knowledge or expertise of interest to the Board's considerations. Decisions of the Board will be taken by Board members, comprising the Independent Chair, Ex Officio and Independent Expert Members.

9. Conduct

26. All members of the Board, and any groups (eg sub-groups and working groups), set up under its auspices, are expected to conduct themselves at all times in accordance with the 'The Seven Principles of Public Life' as recommended in the Nolan Report[3] and such relevant provisions of the Code of Conduct for Board Members of Public Bodies[4] as could reasonably be applied to the appointment. The Seven Principles of Public Life are:
    - selflessness
    - integrity
    - objectivity
    - accountability

[3] https://www.gov.uk/government/publications/the-7-principles-of-public-life

[4] https://www.gov.uk/government/publications/code-of-conduct-for-board-members-of-public-bodies

- openness
- honesty
- leadership.

10. Declarations of Interest

27. A conflict of interest is a set of circumstances by which a reasonable member of the public would consider that an individual's ability to apply judgement or act, in the context of their membership of the UKPPLAB, is, or could be, impaired or influenced by another interest they hold. Conflicts of interest may arise from financial interests and more broadly from official dealings with, or decisions in respect of, individuals who share private interests.

28. All members of the Board, and any groups (eg sub-groups and working groups) set up under its auspices, are expected to ensure that they are not placed in a position that risks, or appears to risk, compromising their role in respect to the UKPPLAB. Any personal or business interests should be declared in writing to inform a register of interests for the Board, held by the Secretariat. Specific interests in relation to any agenda item or discussion for which that conflict arises should be raised in advance of meetings with the Chair. It is the responsibility of the Chair to determine whether that interest raises a question of conflict, and to determine if any action, for example asking a Board member to withdraw from a specific discussion, should be needed.

11. Personal Liability

29. In any legal proceedings brought against a member of the UKPPLAB by a third party in connection with the performance of their duties as a member of the Board, the Department will meet any civil liability which they incur, provided that they acted diligently, honestly and in good faith, and did not act recklessly, in relation to the matter in respect of which the liability was incurred.

30. Members of the Board may be personally liable if they make a fraudulent or negligent statement which results in a loss to the third party, and they may commit a breach of confidence under common law or a criminal offence under insider dealing legislation if they misuse information gained through holding the office.

12. Confidentiality and information sharing

31. All members of the Board, and of any groups (eg sub-groups and working groups) set up under its auspices, must not misuse information gained in the course of their public service for personal gain or for political purpose. They must not disclose any information which is confidential in nature, or which is provided in confidence without authority. This duty continues to apply after their appointment has ended. They are required to exercise care in the use of information that they acquire in the course of their duties and to protect the information that is held in confidence.

32. In keeping with the Board's role to encourage and support collaboration between the PLBs and SPGs, it will seek to be as open and transparent as possible, consistent with its remit. The Board will communicate its information sharing and confidentiality policy.

33. Freedom of Information requests will be handled in line with the policy of the Department of Health and Social Care.

13. Wider engagement, reporting and communications

34. It will be important for the Board to engage effectively with other pharmacy bodies, not represented on the Board, as well as wider interests, to inform the work of the Board. The Board will establish a collaborative and inclusive stakeholder forum, involving other groups such as trade bodies, trade unions, regulators and education bodies, as proposed in the UK Commission's Report. Also, the Board will set up a Patient and Public Reference Group.

35. Reporting and communication of the activity of the Board will be achieved through a range of means, including:

    a) Publication of a statement following each Board meeting and the minutes once they have been ratified by the Board;

    b) The Chair will consider the need for public announcements about the work of the Board, in liaison with Board members and the Secretariat. The Chair will be the main spokesperson for the Board and will involve Board members in relevant communications activity, as appropriate. Board members should pass all media enquiries onto the Secretariat team for review and advice in liaison with the Chair.

    c) Through the maintenance of a website for the Board and its activities;

d) There will be an annual report of the Board's work made publicly available.

14. Role and Responsibilities of the Chair

36. 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 the remit of the Board.

37. The chair will have the following responsibilities:

- Inform the appointment of the Independent Expert Members of the Board;
- Deliver the agreed tasks of the Board;
- Set the Board's agendas and work programme, informed by input from other Board members;
- Steer the discussions according to the Board's overall role and individual meeting agendas;
- Ensure the Board functions and acts in an inclusive manner, and delivers in the interests of patients and the public;
- Undertake meetings with third parties to encourage the strongest sense of broad involvement of pharmacy professionals and other stakeholders;
- Keep the group discussion unified, inclusive of all members and discourage disruption or dominance by any members;
- Encourage constructive debate, without forcing agreement;
- Prevent repetitive debate;
- Summarise the main points and key decisions from the debate;
- Sign off meeting minutes once approved by the Board;
- Sign off communications from the Board, including the annual report;
- Report to the CPhOs on a monthly basis and to the PLBs and SPGs, as necessary, in addition to the regular communication between the Board and the PLBs and SPGs through their respective representative on the Board.

15. Role and Responsibilities of the Board Members

38. Appointed Independent Expert Members are expected to:

- Provide leadership, support and guidance to the organisations involved and enable collaborative delivery of the UK Commission's recommendations and the Board's remit in respect of effective pharmacy professional leadership;
- Draw on their particular areas of leadership expertise 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;
- Provide constructive challenge and feedback to bring an independent perspective to the Board's work;
- Ensure the Board functions and acts in an inclusive manner, and delivers in the interests of patients and the public.

39. Ex Officio Members will bring the perspective of the professional leadership organisation they represent to the considerations and activities of the Board. While the Independent Chair will report formally to the PLBs and SPGs, as well as the CPhOs, the Ex Officio Members will provide a communication link between the Board and the PLBs and SPGs on a day-to-day basis.

40. All Board members are expected to share in the general responsibility to consider the wider context in which their expertise is deployed.

16. Recommendations, decisions and collective responsibility

41. The Chair will seek to arrive at a consensus of the Board members to reach decisions on recommendations.

42. If consensus is not achievable the Chair will seek to achieve a clear and balanced majority view to form the basis of recommendations. In these circumstances the views of members who disagree with the majority view, or wish to reserve their position, will be recorded in the minutes.

43. All members of the Board should respect the principle of collective responsibility and support the recommendations of the Board[5].

17. Secretariat

44. The Board will be supported by a Secretariat. The Secretariat are not members of the Board.

45. The Secretariat will provide impartial support for the work of the Board, including in the following ways:
    - Support the Chair and members;
    - Organise meetings, agendas and papers;
    - Documenting proceedings, especially minutes;
    - Develop and maintain a project plan;

[5] It is recognised that Ex Officio Members of the Board may need to adopt the position of the organisation they represent.

- Maintain official records of the process;
- Co-ordinate at an operational level, the collective and collaborative work across PLBs and SPGs, including any engagement with the IEMs;
- Support any communications from the Chair and Board, including the maintenance of the Board's website and handling media inquiries;
- Maintain a register of interests of all Board members;
- Support the recruitment and induction of Board members.

Annex A: UK Commission on Pharmacy Professional Leadership Recommendations

The recommendations of the UK Commission on Pharmacy Professional Leadership, as set out in their report of February 2023, are as follows:

1. 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 Council would lead delivery of the UK Commission's vision and recommendations for the benefit of patients and the public.*
- *This professional leadership framework would include robust processes for governance and accountability, and outline a clear identity for the Federation and its unique proposition and goals.*

2. Regulatory Support

Through the Council, to 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.

- *Professional leadership bodies and specialist professional groups 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.*

3. Regional, Country and International Relations and Engagement

Through the Council, to 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 professional leadership bodies, specialist professional groups and individual pharmacy professionals across all career stages.*

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

4. Scope of Practice for Future Pharmacy Professionals

Through the Council, to enable professional leadership bodies and specialist professional groups 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.*

5. Professional Education and Training

Through the Council, to 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.*

The UK Commission on Pharmacy Professional Leadership considered three options to facilitate authoritative pharmacy professional leadership in the longer term:

- ***No change**, but continue the federal framework and Council. The advantage of this is that it is low cost, and does not cause disruption; however, it may maintain the status quo and risks stagnation of progress. The Commission stresses the importance of taking account of the need for collaboration to achieve what is needed for the public, and pharmacy professions.*

- ***A single PLB[6] offers to provide the infrastructure** to host others on more equal terms……. This may lead to a more formal amalgamation of existing bodies in due course in the form of faculties.*

- ***A new PLB**, which could eventually apply for recognition as a royal college, with formal representation from all PLBs and SPGs[7] of adequate size and governance……. This could develop into a UK College of Pharmacy, or a UK Academy of Pharmacy Professionals; such a body could seek formal Royal status from the Privy Council in due course.*

  …….. Ultimately it will be for members of the professions and the bodies that represent them in the Federation to determine the form and structure which delivers the professional leadership that is required in the longer term, including whether a wholly new body is needed or whether an existing one can demonstrate to others it has the necessary maturity, expertise and inclusive leadership approach required. 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.

[6] Professional leadership body
[7] Specialist professional groups

Annex B: Board Membership

Name	Position	Organisation
Sir Hugh Taylor KCB Independent Chair		
Nonyelum Anigbo Ex Officio Member – Specialist Professional Group	President	British Pharmaceutical Students' Association
Professor Claire Anderson Ex Officio Member – Professional Leadership Body	President	Royal Pharmaceutical Society
Raymond Anderson Independent Expert Member	Director Associate Consultant	Northern Pharmacies Ltd Health and Social Care Leadership Centre, Belfast
Laura Angus Independent Expert Member	Chief Pharmacy Officer/Director of Pharmacy and Medicines Optimisation	NHS Humber and North Yorkshire Integrated Care Board
Rebecca Chamberlain Independent Expert Member	Standards Manager	General Optical Council
Dr Jeanette Dickson Ex Officio Member – Professional Leadership Body	Chair of Council	Academy of Medical Royal Colleges
Mildred Johnson Independent Expert Member	Chief Pharmacist/Clinical Director of Pharmacy and Medicines Optimisation	Maidstone & Tunbridge Wells NHS Trust
Sheelin McKeagney Ex Officio Member – Professional Leadership Body	Chair	Pharmacy Forum Northern Ireland
Dr Berwyn Owen Independent Expert Member	Community Pharmacist	Fferyllfa Penygroes Pharmacy, Caernarfon
Professor Mahendra Patel OBE Independent Expert Member	Director	Centre for Research Equity, University of Oxford
Mohamed Rahman Ex Officio Member – Specialist Professional Group	President	UK Clinical Pharmacy Association

Joan Saddler OBE Chair, Patient and Public Reference Group	Co-Chair	NHS Equality and Diversity Council
Shilpa Shah Independent Expert Member	Chief Executive	Community Pharmacy North East London
Karen Shuker Ex Officio Member – Specialist Professional Group	President	College of Mental Health Pharmacy
Panayiotis Sphikas Independent Expert Member	Head of Pharmacy Operations	University College London Hospitals NHS Foundation Trust
Nicola Stockmann Ex Officio Member – Professional Leadership Body	President	Association of Pharmacy Technicians UK
Dr Graham Stretch Ex Officio Member – Specialist Professional Group	President	Primary Care Pharmacy Association
Ellen Williams Independent Expert Member	Director of Regional Pharmacy Training	Pharmacy Workforce Development South
Joseph Williams Ex Officio Member – Specialist Professional Group	Chair	British Oncology Pharmacy Association
Independent Expert Member – Scotland	In process	