

# An analysis of the protected characteristics of pharmacists in the GPhC's managing concerns process

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# Why are we doing this?

## Managing Concerns Strategy

- Identify and monitor any disproportionate impact on different groups.

## 2023 PSA Standard 3

- Use evidence to identify unfairness in its processes

## EDI Strategy

- Routinely publish diversity datasets

## Stakeholder Interest

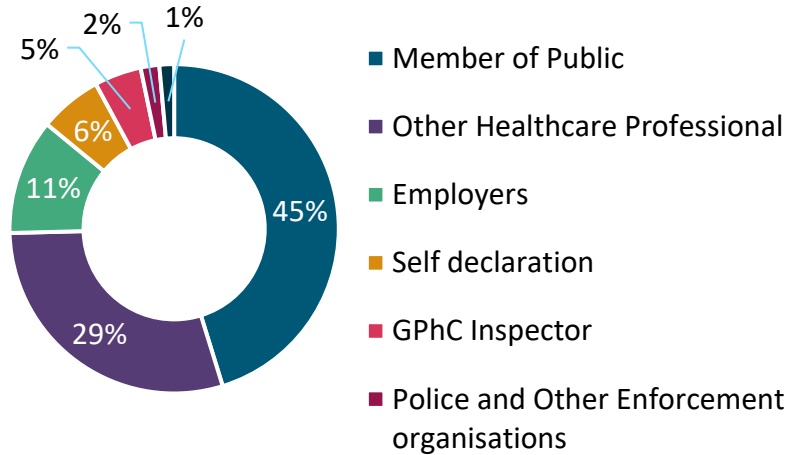
- Media interest regarding over-representation of certain groups in FtP

FtP EDI Analysis

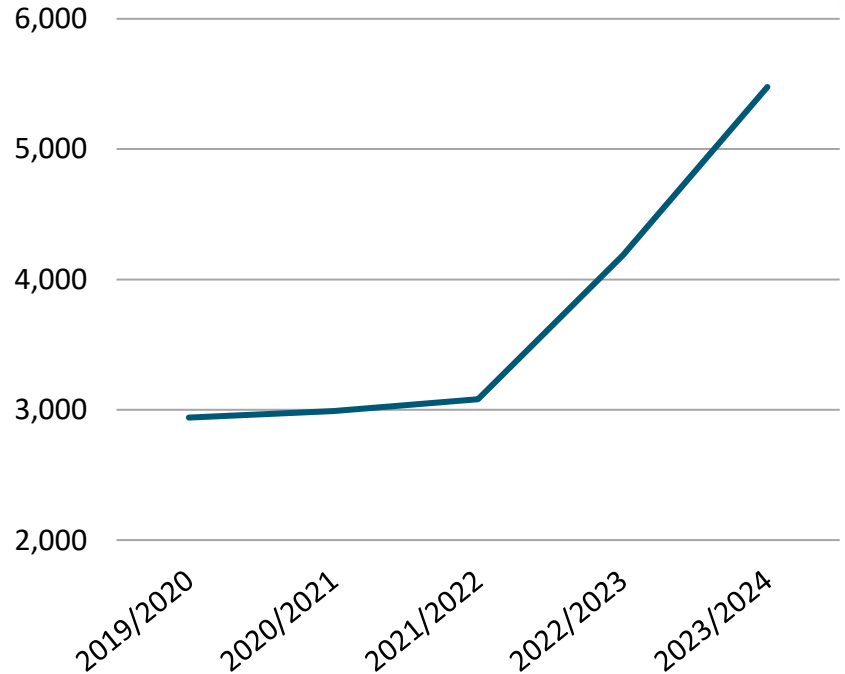
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graph TD; A[Managing Concerns Strategy] --> D((FtP EDI Analysis)); B[2023 PSA Standard 3] --> D; C[EDI Strategy] --> D; E[Stakeholder Interest] --> D;
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# Concerns received at the GPhC

- Rising trend of concerns received over the last five years
- Where do our concerns come from?



Number of concerns received over the past five years



# Overview of concerns received 2023-24

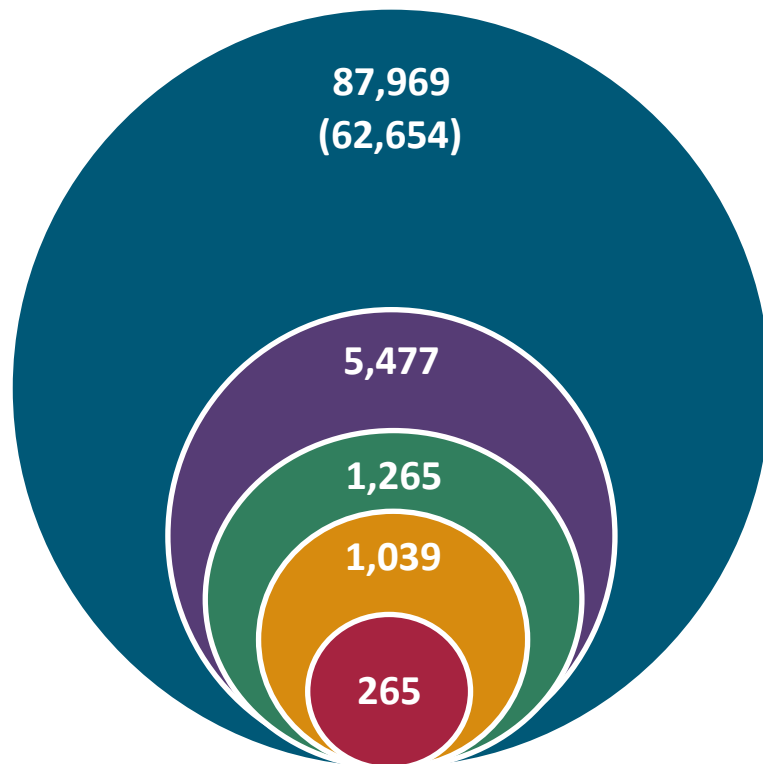
Overall register  
(pharmacists)

Total concerns received

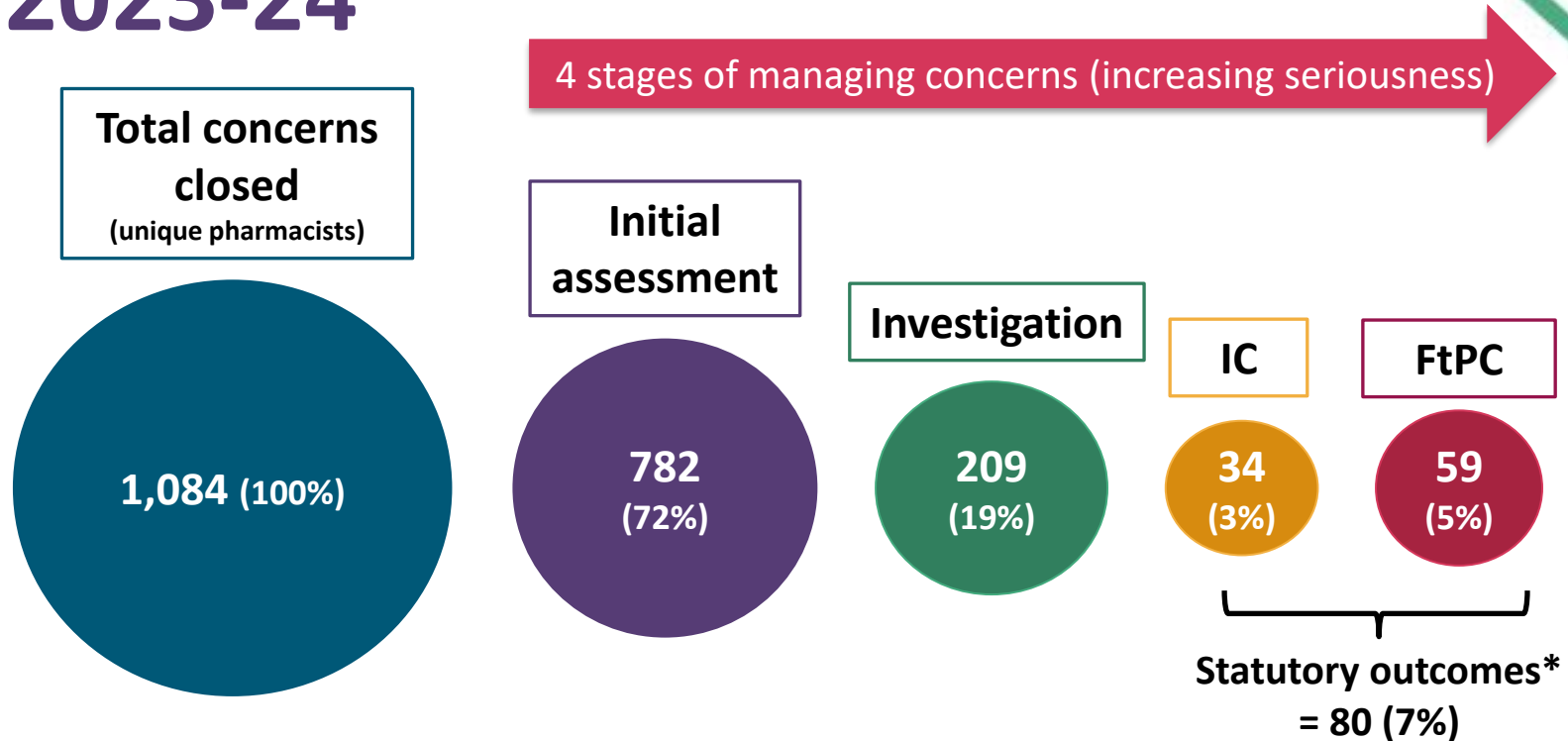
Concerns identifying a  
pharmacist

Concerns about unique  
pharmacists

Concerns investigated



# Overview of concerns closed 2023-24



\*Statutory outcomes include advice, warnings, undertakings, conditions, suspension and removal

# What we did

## What we looked at

- Concerns received
- Concerns investigated by the GPhC
- The outcome of concerns closed

## Characteristics explored

- Ethnicity
- Sex
- Age group

## Scope

- One year of data - 2023/24 FY
- Only looked at pharmacists as very small number of pharmacy technician cases
- Only analysed concerns where an individual has been identified
- If multiple concerns about same individual, only counted once

## Statistical tests

- Chi squared test to show whether there is an overall statistically significant relationship
- Confidence intervals to identify specific outliers
- Indicates relationship and not causation
- Caution needed due to small numbers

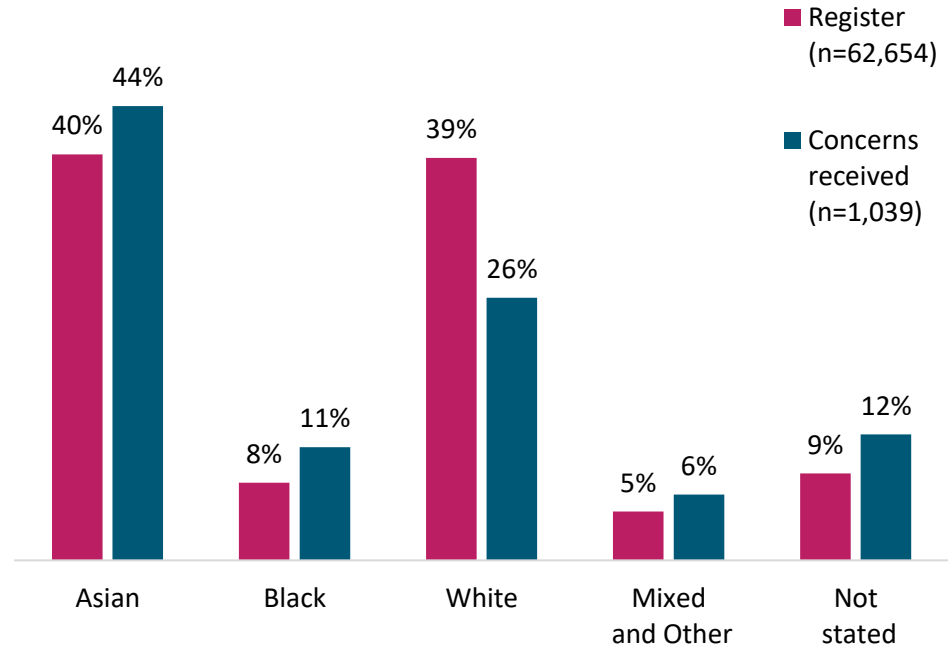
# Key Findings



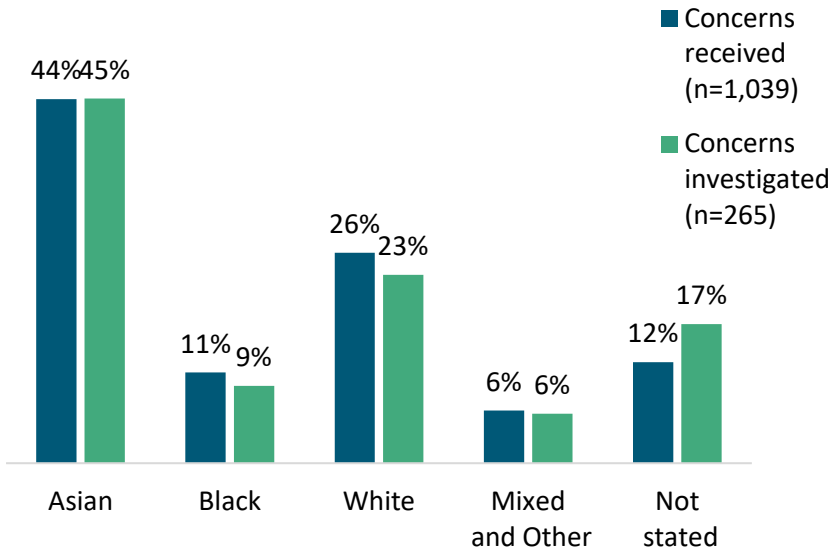


# Ethnicity: concerns received

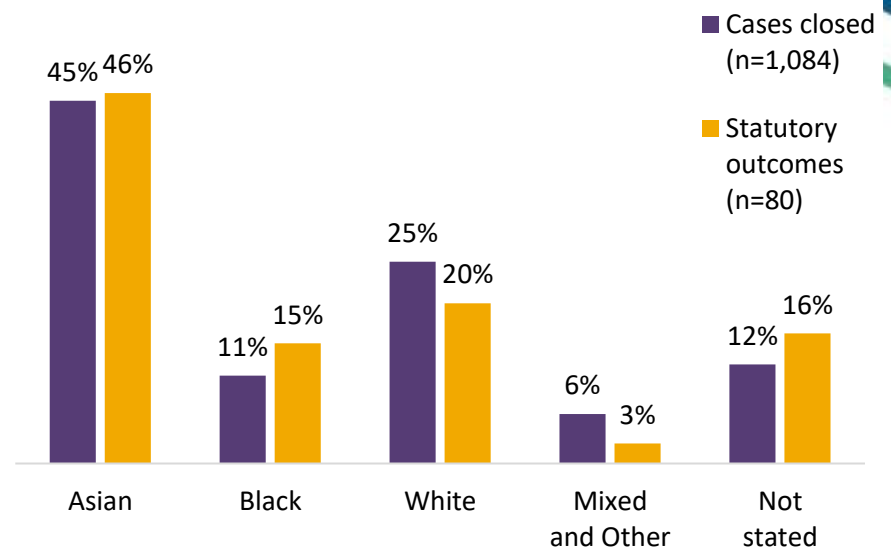
- Statistically significant relationship between the ethnicity of the pharmacist and the number of concerns received by the GPhC
- Under-representation of white pharmacists, over-representation of all other groups



# Ethnicity: investigations & outcomes



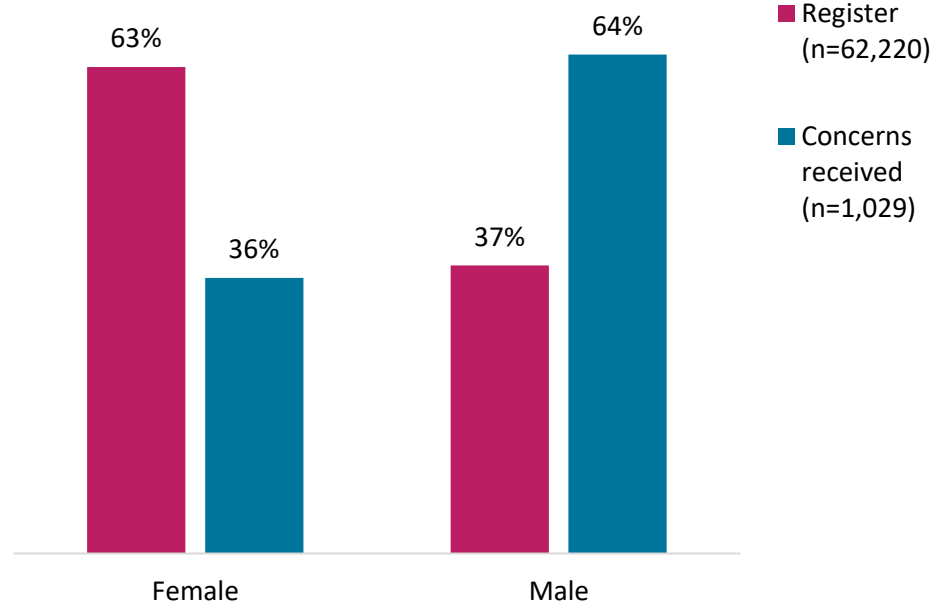
- Once a concern was progressed, there was no statistically significant relationship between ethnicity and concerns investigated
- Non-stated was statistically over-represented



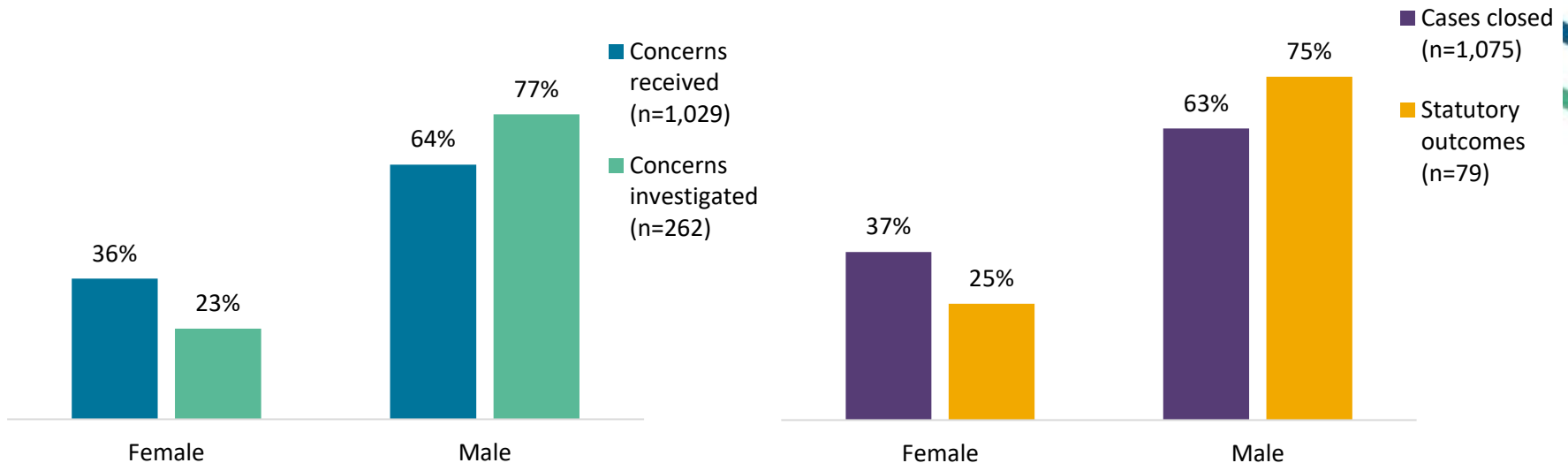
- No statistically significant relationship between ethnicity and the outcome of the managing concerns process

# Sex: concerns received

- Statistically significant relationship between sex and concerns received
- Under-representation of female pharmacists, over-representation of male pharmacists



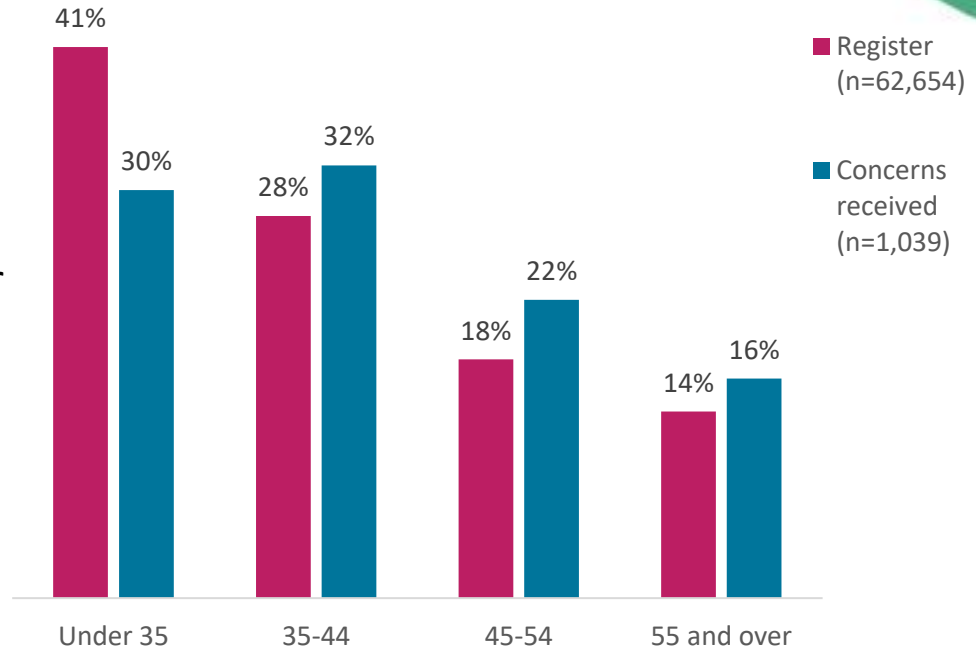
# Sex: investigations & outcomes



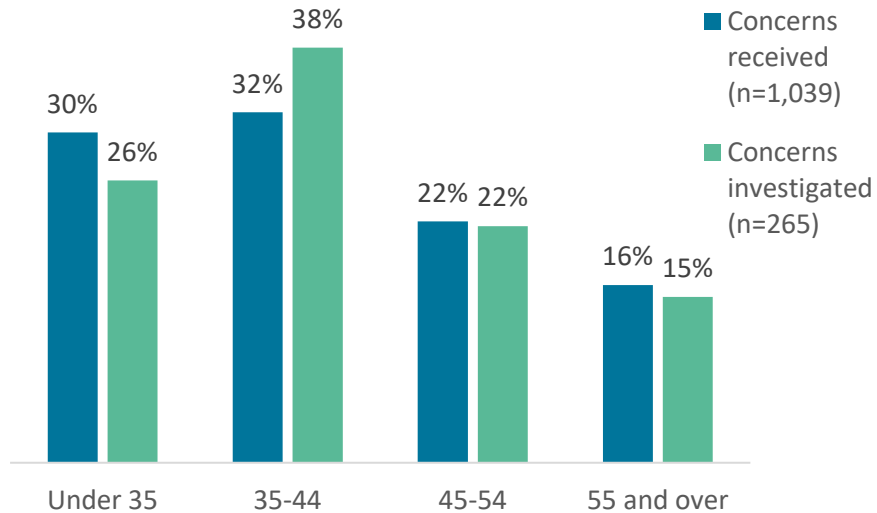
- Statistically significant relationship between sex and concerns progressed by the GPhC
  - Under-representation of female pharmacists and overrepresentation of male pharmacists
- Statistically significant relationship between sex and the outcome of the managing concerns process

# Age: concerns received

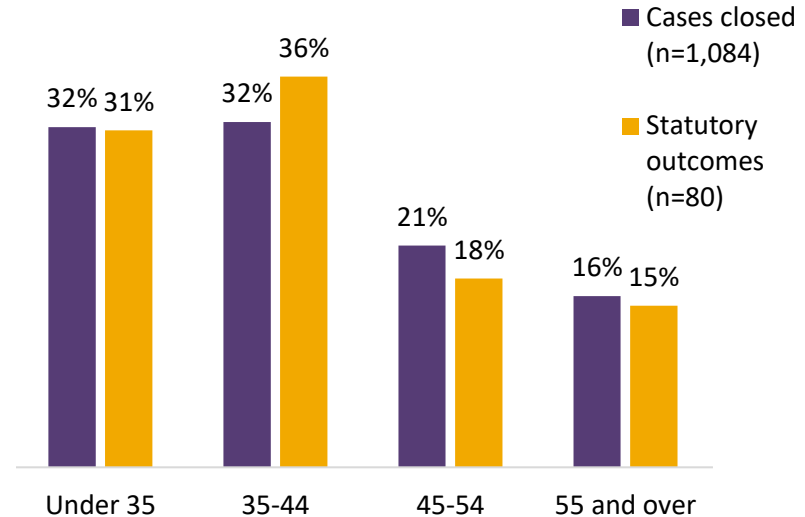
- Statistically significant relationship between age and concerns received
- Under-representation of younger pharmacists, overrepresentation of all other age groups



# Age: investigations & outcomes



- Once a concern was progressed, there was no statistically significant relationship between age and concerns investigated



- No statistically significant relationship between age and the outcome of the managing concerns process

# Summary of findings

	Ethnicity	Sex	Age
Concerns received	<ul style="list-style-type: none"><li>• Under-representation of white pharmacists</li><li>• Over-representation of all other ethnicities</li></ul>	<ul style="list-style-type: none"><li>• Under-representation of female pharmacists</li><li>• Over-representation of males</li></ul>	<ul style="list-style-type: none"><li>• Under-representation of those under the age of 35</li><li>• Over-representation of all age groups 36 and over</li></ul>
Concerns investigated	<ul style="list-style-type: none"><li>• No overall relationship</li><li>• But over-representation of pharmacists with 'not stated ethnicity'</li></ul>	<ul style="list-style-type: none"><li>• Under-representation of females</li><li>• Over-representation of males</li></ul>	<ul style="list-style-type: none"><li>• No significant relationship</li></ul>
Statutory outcomes	<ul style="list-style-type: none"><li>• No significant relationship</li></ul>	<ul style="list-style-type: none"><li>• Under-representation of female pharmacists</li><li>• Over-representation of males</li></ul>	<ul style="list-style-type: none"><li>• No significant relationship</li></ul>

# Conclusions

- Higher proportions of referrals to the GPhC for male pharmacists, older pharmacists and those from ethnic minorities
- Once a concern has been raised and is being processed by the GPhC, the disparities disappear for ethnicity and for age
- Ongoing over-representation of male pharmacists in our investigations and in those receiving the most serious sanctions



This analysis does not identify causation

Other contributing factors need to be considered



# Next steps



Further analysis we are considering:

- Different pharmacist roles
- Allegation types
- Referral sources
- Intersectionality
- Characteristics of people raising concerns



We are looking at a range of ways to minimise the bias causing over-representation

# Our work to minimise bias



- Anonymisation pilot:
  - All personal information that could indicate a person's race, nationality, ethnicity, religion etc redacted
  - IC makes decisions on information that does not include personal information
  - Outcomes to be published soon
- Guidance/training:
  - Antisemitism and islamophobia
  - Freedom of expression (in development)
  - Taking account of cultural sensitivities when demonstrating insight, remorse and making an apology
  - Ongoing unconscious bias training for staff and committee members



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