

About the PSNI

The PSNI regulates the practice of pharmacists in Northern Ireland.

It has 3,034 pharmacists and 538 pharmacy premises on its register (as at 31 December 2024).






Snapshot 2023/24

Pharmaceutical Society of Northern Ireland | Annual review of performance

About the PSNI's performance for 2023/24

For this review, the PSNI met 11 out of 18 of our Standards of Good Regulation. These Standards provide the benchmark against which we review performance. Meeting or not meeting a Standard is not the full story about how a regulator is performing. Our report provides more detail about the PSNI's performance this year.

Standards of Good Regulation met for 2023/24 performance review

	General Standards	0 out of 5
	Guidance and Standards	1 out of 2
	Education and Training	2 out of 2
	Registration	4 out of 4
	Fitness to Practise	4 out of 5

Total Standards 11 out of 18

Standards met 2021-23

2022/23 15 out of 18

2021/22 18 out of 18

Key findings and areas for improvement

For much of this review period, many aspects of the PSNI's performance have been poor, and this is reflected in our assessment against the Standards. We recognise that the PSNI, as a small regulator, has been significantly impacted by turnover of senior staff. We also recognise the efforts that the PSNI has made since September 2024 to improve its performance, and we hope this will bear fruit in 2024/25. However, we have identified weaknesses in multiple regulatory functions during 2023/24 which have led us to conclude that the PSNI has not met seven of our 18 Standards of Good Regulation this year.

● Provides accurate & fully accessible information (Standard 1)

For most of this review period, the PSNI's Council papers were not published ahead of the Council meeting and contained minimal information about its operational, corporate, policy and statutory functions. We raised these issues with the PSNI on multiple occasions but did not see any improvement until the final Council meeting in December. We also saw delays to the PSNI's website refresh project and publication of the PSNI's 2024/25 Business Plan.

● Clarity and focus on delivering core functions (Standard 2)

For much of the review period, we saw the PSNI make little progress on key projects such as publication of a new Corporate Strategy, the review of The Code, guidance for registrants, education reform and improvements to its website. We considered these in our assessments against the relevant Standards, and also took into account the challenges the PSNI has faced this year, particularly in terms of senior staff turnover.

● Equality, Diversity and Inclusion (EDI) (Standard 3)

This year we introduced a new approach to assessing regulators' performance on EDI. Standard 3 now covers four high-level outcomes, all of which a regulator must meet to meet our Standard. For this review period we have not been assured that the PSNI is meeting outcomes 1, 2, 3 and 4 and have identified a number of significant gaps. It is notable that the PSNI did not have an EDI Strategy in place during the review period. We also saw no evidence of the PSNI undertaking activities designed to embed EDI in its work and identify and improve processes across different areas of its work such as registration and fitness to practice. The PSNI is working to improve EDI data collection at registration/renewal and is developing its EDI Strategy and Action Plan which should begin to embed EDI and address the weaknesses identified.

● Reports on performance and addresses concerns (Standard 4)

We continued to encounter problems contacting and obtaining information from the PSNI for the majority of 2024, and this only improved following a letter on this issue from the PSA Chair to the PSNI President in September 2024. We also noted that, until the final Council meeting in December, the PSNI's public Council papers contained few substantive items in general, and no items on its operational performance. This Standard was not met last year and performance has, if anything, been worse for the majority of the review period.

● Consults relevant stakeholders (Standard 5)

There has been inactivity across a number of different areas and workstreams and stakeholders have sought, but not received updates from the PSNI on these projects. The PSNI is a small regulator and has faced significant internal challenges during the review period. However, certain fundamental tasks relevant to this Standard have not been done.

● Provides guidance (Standard 7)

In our last two performance review reports, we noted it was important that the PSNI should take prompt action to ensure it understands, and is managing, the risks arising from online pharmacy. The pharmacy sector and indeed the wider healthcare regulatory landscape have identified this as a clear area of risk and the GPhC published updated guidance on this topic in 2022. However, the PSNI again made little progress this year against its plans to update its 2016 guidance.

● Fitness to Practise timeliness (Standard 15)

We recognise that the PSNI's small caseload means that median timeframes can be impacted by outliers, which may have delays caused by factors outside the PSNI's control. However, the data also shows an overall increase in the caseload, an increase in older cases, and the number of cases awaiting hearing, which is higher than the number of hearings the PSNI usually holds each year. Therefore, the Standard is not met. We note the PSNI has reprofiled resources to progress cases and it expects to see the impact of this next year.

Escalation

In line with our escalation policy, we have written to the Minister of Health for Northern Ireland and the Chair of the Northern Ireland Assembly Committee for Health to make them aware of our concerns. We will be closely monitoring the PSNI's performance in 2024/25.



Find out more about our performance reviews, including:

- the Standards of Good Regulation
- a short guide to how we carry out our reviews
- read recent reports