



# Public Consultation Report on Proposed Changes to the Pharmaceutical Society of Ireland (Continuing Professional Development) Rules and Pharmaceutical Society of Ireland (Registration) Rules

## Contents

1. Introduction .....	3
2. Background.....	3
3. Public Consultation .....	4
3.1 Purpose of the Consultation .....	4
3.2 About the Consultation.....	5
4. Consultation Response.....	6
4.1 Response to Online Survey .....	6
4.2 Email Responses.....	20
5. Discussion.....	22
5.1 Removal of Practice Review from the CPD system for pharmacists.....	22
5.2 Annual Submission of CPD Records by pharmacists.....	22
5.3 Annual Submission of CPD Records by pharmaceutical assistants.....	23
5.4 Delivery mechanism for the CPD system .....	23
5.5 Policy-based approach to the quality assurance of CPD activities .....	24
5.6 Full text of draft CPD rules .....	24
5.7 Linking ongoing registration and CPD for pharmacists.....	24
5.8 Linking ongoing registration and CPD for pharmaceutical assistants.....	25
5.9 Flexibility to accommodate pharmacists and pharmaceutical assistants with special circumstances .....	25
5.10 Full text of the proposed changes to the Registration Rules.....	26
6. Conclusion .....	26
Appendix 1 .....	27

# 1. Introduction

This report summarises the feedback received during the public consultation on proposed changes to the Pharmaceutical Society of Ireland (Continuing Professional Development) Rules 2015 (S.I. No. 553 of 2015) and the Pharmaceutical Society of Ireland (Registration) Rules 2008 (S.I. No. 494 of 2008)(as amended). The public consultation was open from 6 January to 3 February 2025.

## 2. Background

### Continuing Professional Development (CPD) System for Pharmacists

Under the strategic objective in our [Corporate Strategy 2021-2024](#), Advancing the Role of Pharmacy and Pharmacists in the Future Integrated Healthcare System, we committed to reviewing our current model of CPD to ensure it supports future pharmacist practice in all settings, that it is agile, adaptive and sustainable, and that it delivers value for money.

The review was carried out with the independent, external support of Mazars who were appointed by a competitive public procurement process. The review sought the input and experience of registrants and others. The focus of the project was:

- To identify the key drivers that will inform the future development of the CPD model and the setting of our key objectives and responsibilities in the further development of the system.
- To examine and evaluate the effectiveness of the current CPD governance and management structures in the performance and delivery of the CPD system.
- To make recommendations about how the current CPD model can be adapted, changed or improved.
- Examine the viability, resourcing, and sustainability of any proposed model, with consideration to the size of the register of pharmacists and the size of the register of retail pharmacy businesses.

The culmination of the review was a report on the [Review of the CPD Model for Pharmacists](#) (The Mazar's Report) which sets out the outcome and recommendations from the review process. At the PSI Council meeting of 14 December 2023, the PSI Council accepted the findings of the Mazars Report and approved the recommendations therein.

Subsequently, we conducted supplementary desk-based research, stakeholder engagement and consultation to develop an implementation proposal for the revised CPD system for pharmacists. The purpose of this implementation proposal was to further inform and elaborate on the PSI Council's consideration on the scope of the revised CPD system for pharmacists and to provide an evidence-based framework to implement the recommendations contained within the Mazar's report. On 25 April 2024, the PSI Council approved the implementation proposal for the revised CPD system for pharmacists.

## CPD System for Pharmaceutical Assistants

The introduction of a new CPD system for pharmaceutical assistants follows on from legislative changes to the [Regulated Professions \(Health and Social Care\) \(Amendment\) Act 2020](#). Section 53 of this Act (once commenced) will introduce a requirement for PSI to oversee a CPD system for pharmaceutical assistants.

To assist us in identifying an appropriate system of CPD for pharmaceutical assistants, we sought independent, external support from Mazar's who were appointed by a competitive public procurement process. Mazar's assisted us by undertaking extensive desk-based research and engagement with national and international stakeholders and provided their [Report to Support the Development of a Continuing Professional Development \(CPD\) Model for Pharmaceutical Assistants](#) to the PSI Council. This report was approved by the PSI Council at its meeting on 22 June 2023.

We subsequently developed themes in consultation with the Pharmaceutical Assistants Association, that will provide direction and guidance for pharmaceutical assistants to conduct and manage their CPD learning activities within the new CPD model. We held a [public consultation on CPD themes for pharmaceutical assistants](#) from 20 June 2024 to 18 July 2024. The themes to underpin a system of CPD for pharmaceutical assistants were approved by the PSI Council at its meeting of 3 October 2024.

## 3. Public Consultation

To operationalise the approved policy changes to the CPD system for pharmacists and the introduction of a CPD system for pharmaceutical assistants, proposed draft amendments to the Pharmaceutical Society of Ireland (Continuing Professional Development) and Pharmaceutical Society of Ireland (Registration) rules were presented to the PSI Council at its meeting of 12 December 2024. The PSI Council approved the draft rules for public consultation. The full text of the draft amendments to the rules is available at Appendix 1.

### 3.1 Purpose of the Consultation

The purpose of the public consultation was to seek feedback on the proposed changes to the PSI (Continuing Professional Development) and PSI (Registration) Rules, in line with the policy adopted by the Council. The proposed changes to the rules included:

- Development and implementation of a CPD system for pharmaceutical assistants
- Removal of Practice Review from the current CPD system for pharmacists
- Submission of CPD records by pharmacists and pharmaceutical assistants on an annual basis
- Introduction of a process so that a pharmacist's or pharmaceutical assistant's ongoing registration is linked with the requirement to engage with CPD.

- The setting out of the CPD requirements of pharmacists and pharmaceutical assistants in relevant policies approved by the PSI Council
- Flexibility for the PSI Council to continue to operate the CPD system through the outsourced mechanism delivered and managed by the Irish Institute of Pharmacy (IIOP), or otherwise, where necessary
- A new policy-based approach to the quality assurance of CPD activities delivered by the IIOP.

### 3.2 About the Consultation

The public consultation opened to all registered pharmacists, pharmaceutical assistants, pharmacy members of the public on 6 January 2025 and closed on 3 February 2025.

At the time of the public consultation, there were 7729 pharmacists, 175 pharmaceutical assistants and 1987 pharmacies registered with the PSI. An email was issued to all registrants on 7 January 2025 inviting feedback on the public consultation. A reminder was also included as part of an email issued to all registrants on 22 January 2025. A dedicated reminder email to highlight the final week for public consultation feedback was issued to all registrants on 27 January 2025.

Targeted emails were also issued to the following stakeholders:

- Irish Pharmacy Union (IPU)
- Hospital Pharmacists Association of Ireland (HPAI)
- Pharmacists in Industry, Education and Regulatory (PIER)
- Pharmaceutical Assistants Association (PAA)
- Medicines, Controlled Drugs and Pharmacy Legislation Unit, Department of Health
- Schools of Pharmacy (RCSI, TCD and UCC)
- Irish Institute of Pharmacy (IIOP)

Approximately one hundred other stakeholders were made aware of the consultation by a direct email from PSI. This included patient advocacy groups and other professional and service regulators with a particular interest in CPD for health and social care professionals.

The consultation was made available under the 'Public Consultations' section of the PSI website and regular social media posts were shared on PSI's social media channels during the consultation period, inviting feedback to the public consultation. Feedback was invited by completing an online survey, by email or by post.

To support understanding on the proposed changes to the legislation, an information video was developed which provided an overview of the key proposed changes. This information video was shared in the direct email to all registrants and was also made available on the public consultation webpage. A comprehensive set of [Frequently Asked Questions \(FAQ's\)](#) was also made available on the public consultation webpage.

## 4. Consultation Response

239 responses were received via the online survey. 10 responses were received via email. The email responses included 7 responses provided by individuals and 3 responses provided on behalf of organisations, including:

- Irish Pharmacy Union (IPU)
- Health Service Executive, Antimicrobial Resistance and Infection Control (AMRIC) Team
- Health Service Executive, Access and Integration Drug Management Programme.

No responses to the consultation were received by post.

### 4.1 Response to Online Survey

#### Question 1: Data Protection

239/239 of the respondents confirmed they consented to providing their answers to the questions in the survey in accordance with data protection legislation and the PSI's data protection statement available on the PSI website.

#### Question 2: Please select which best describes you.

The profile of the 239 respondents was as follows:

- 223/239 (93%) pharmacists
- 10/239 (4%) pharmaceutical assistants
- 1/239 (<1%) pharmacy student
- 1/239 (<1%) member of the public/patient
- 2/239 (1%) other healthcare professionals
- 2/239 (1%) 'other', one of which identified as a pharmacy assistant/pharmacy technician

#### Question 3: Are you responding on your own behalf, or on behalf of an organisation?

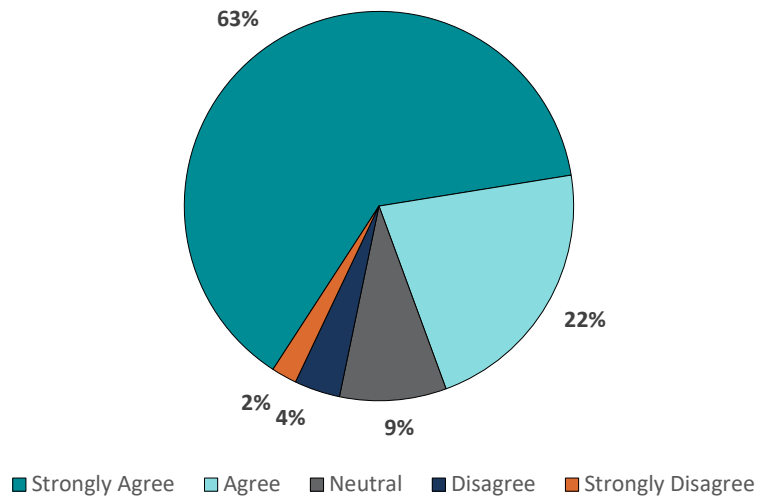
Respondents were given the option to respond to the online survey on their own behalf or on behalf of an organisation. 238/239 respondents indicated that they were responding on their own behalf. 1/238 respondents indicated that they were responding on behalf of an organisation.

#### Question 4: If responding on behalf of an organisation, please state the name of the organisation.

The one response received to the online survey on behalf of an organisation was from the Medical Council of Ireland.

Question 5: The proposed changes to the legislation will remove Practice Review from the CPD system for pharmacists? Do you believe this is proportionate?

Figure 1: Removal of Practice Review



Of the 237/239 responses to this question:

- 150/237 (63%) respondents selected 'Strongly Agree'
- 52/237 (22%) respondents selected 'Agree'
- 21/237 (9%) respondents selected 'Neutral'
- 9/237 (4%) respondents selected 'Disagree'
- 5/237 (2%) respondents selected 'Strongly Disagree'

Question 6. Please state the reason for your answer or provide any additional comments you have.

123/237 of the respondents to the previous question stated a reason for their answer or provided additional comments.

The most common themes received are listed below and reflect support for the proposal to remove Practice Review:

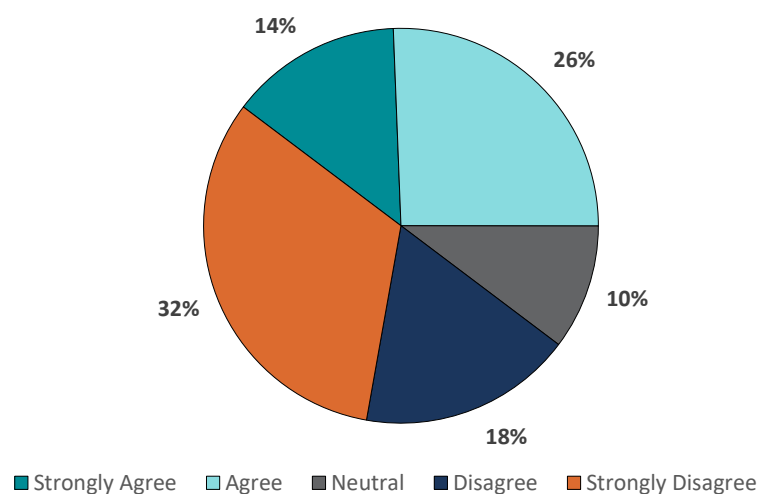
Theme	No. of responses
Not necessary/not relevant/not reflective of practice/no benefit	33 of 123
Stressful	25 of 123

Regulatory Burden – locum cover, travel, accommodation costs, time off work, loss of earnings	22 of 123
Use of resources/value for money/costs of running Practice Review	15 of 123
Lack of similar measures for other healthcare professionals	12 of 123

All comments are available upon request.

Question 7: The proposed changes to the legislation provide for annual submission of CPD records by pharmacists. This is to provide appropriate assurance and to bring the CPD model in line with national and international standards. Do you believe this is proportionate?

Figure 2: Annual Submission of CPD Records by Pharmacists



Of the 234/239 responses to this question:

- 33/234 (14%) respondents selected 'Strongly Agree'
- 60/234 (26%) respondents selected 'Agree'
- 24/234 (10%) respondents selected 'Neutral'
- 41/234 (18%) respondents selected 'Disagree'
- 76/234 (32%) respondents selected 'Strongly Disagree'

Question 8: Please state the reason for your answer or provide any additional comments you have.

139/234 of the respondents to the previous question stated a reason for their answer or provided additional comments.

The most common themes supportive of the proposal to move to annual submission of CPD records by pharmacists were:

Theme	No. of responses
Proportionate requirements needed for annual submission i.e. 2 to 3 cycles	13 of 139
Annual submission appropriate	9 of 139

The most common themes not supportive of the proposal to move to annual submission of CPD records by pharmacists were:

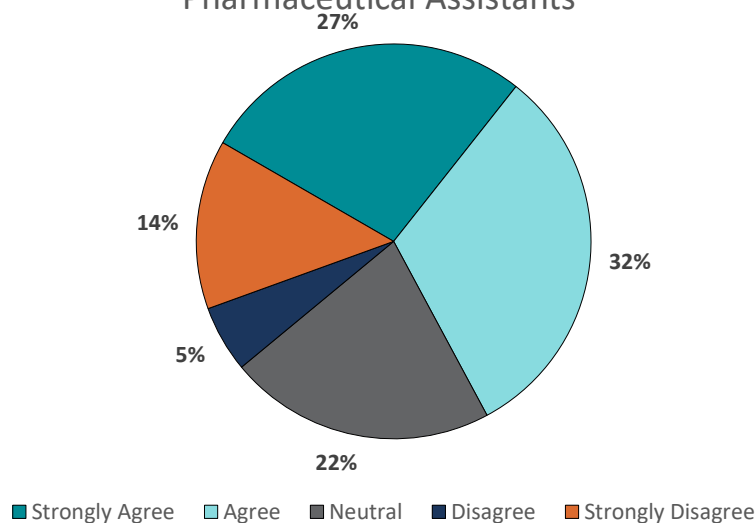
Theme	No. of responses
Regulatory/Administrative burden – increasing workload and pressures	33 of 139
Too frequent/too onerous/not necessary	22 of 139
Recording of CPD – time consuming, no protected time to complete during the working day, too tedious, simplify recording requirements	18 of 139
Preference for CPD contact hours/points or credit-based system/upload of certificates of attendance	13 of 139
Current system is fine	10 of 139
Alternative submission frequency suggested - every 2 years, every 2-3 years	7 of 139

Exemptions needed – retired, sick leave, maternity leave etc	5 of 139
--------------------------------------------------------------	----------

All comments are available upon request.

Question 9: The proposed changes to the legislation will introduce a new CPD system for pharmaceutical assistants. The model will require annual submission of CPD records by pharmaceutical assistants against CPD themes. Do you believe this is proportionate?

Figure 3: Annual Submission of CPD Records by Pharmaceutical Assistants



Of the 238/239 responses to this question:

- 65/238 (27%) respondents selected 'Strongly Agree'
- 75/238 (32%) respondents selected 'Agree'
- 52/238 (22%) respondents selected 'Neutral'
- 13/238 (5%) respondents selected 'Disagree'
- 33/238 (14%) respondents selected 'Strongly Disagree'

Question 10: Please state the reason for your answer or provide any additional comments you have.

89/238 of the respondents to the previous question stated a reason for their answer or provided additional comments.

The most common themes supportive of the proposal to require annual submission of CPD records by pharmaceutical assistants were:

Theme	No. of responses
CPD requirements should be the same as for pharmacists	18 of 89
Appropriate – to keep up to date	14 of 89

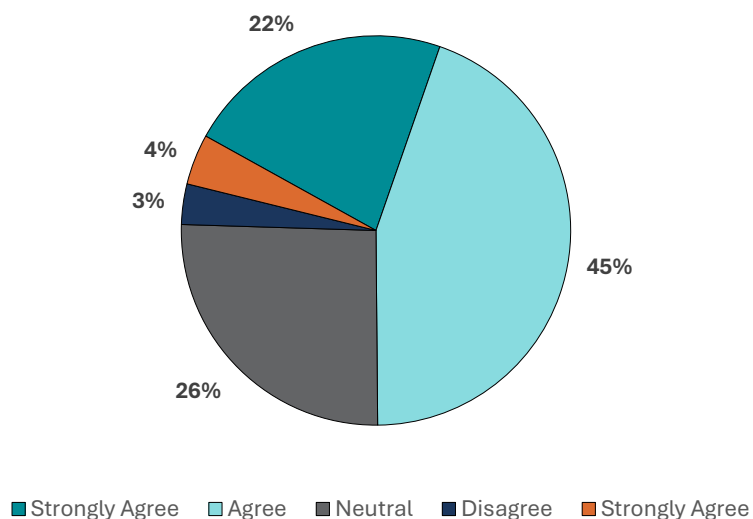
The most common themes not supportive of the proposal to require annual submission of CPD records by pharmaceutical assistants were:

Theme	No. of responses
Too frequent	11 of 89
Utility of introducing a CPD system for the limited number of pharmaceutical assistants remaining on the register	9 of 89

All comments are available upon request.

Question 11: The proposed changes to the legislation will enable the CPD system to be delivered through the IOP, or other mechanisms, where an outsourced mechanism is not possible. Do you believe this is proportionate? (Please note the PSI Council have indicated a continued preference to deliver the CPD system via the current IOP model - see FAQ's).

Figure 4: Delivery mechanism for the CPD System



Of the 238/239 responses to this question:

- 53/238 (22%) respondents selected 'Strongly Agree'
- 106/238 (45%) respondents selected 'Agree'
- 61/238 (26%) respondents selected 'Neutral'
- 8/238 (3%) respondents selected 'Disagree'
- 10/238 (4%) respondents selected 'Strongly Disagree'

Question 12: Please state the reason for your answer or any additional comments

83/238 of the respondents to the previous question stated a reason for their answer or provided additional comments.

The most common themes in relation to this question were:

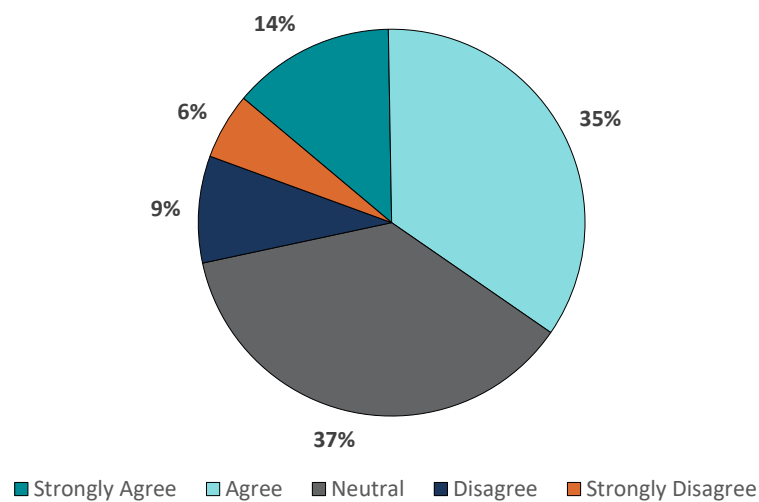
Theme	No. of responses
Positive comments on the IOP – supportive, quality CPD offering, useful resources, separation from PSI	47 of 83

Negative comments on the IOP – website, quality of CPD offering	8 of 83
Preference for a credits/points-based CPD system	5 of 83
Flexibility in mechanism of delivery needed	4 of 83
Requests for more information in order to comment	4 of 83

All comments are available upon request.

Question 13: The proposed changes to the legislation will introduce a policy-based approach to the quality assurance of CPD activities, rather than legislative accreditation standards. It is believed this can sufficiently assure quality and will enable CPD activities to be delivered in a responsive manner. Do you believe this is proportionate?

Figure 5: Policy-based approach to the quality assurance of CPD activities



Of the 235/239 responses to this question:

- 32/235 (14%) respondents selected 'Strongly Agree'
- 82/235 (35%) respondents selected 'Agree'
- 87/235 (37%) respondents selected 'Neutral'
- 21/235 (9%) respondents selected 'Disagree'

- 13/235 (6%) respondents selected ‘Strongly Disagree’

**Question 14: Please state the reason for your answer or any additional comments**

61/235 of the respondents to the previous question stated a reason for their answer or provided additional comments.

The most common themes supportive of the proposal to move to a policy-based approach to the quality assurance of CPD activities, rather than legislative accreditation standards were:

Theme	No. of responses
Appropriate/reasonable	6 of 61
Flexibility needed	4 of 61

The most common theme not supportive of the proposal to move to a policy-based approach to the quality assurance of CPD activities, rather than legislative accreditation standards was:

Theme	No. of responses
Too vague/not clear of impact/more information needed	24 of 61

All comments are available upon request.

Comprehensive [FAQ's](#) to address key questions and explain the changes being proposed for the CPD system were made available on the public consultation webpage.

**Question 15: The full text of the proposed changes to the CPD Rules is provided. Please provide any comments you may have on the text or drafting of the rules, that you wish to be considered. If you have any additional comments, you can also provide them here.**

50/239 respondents provided a response to this question.

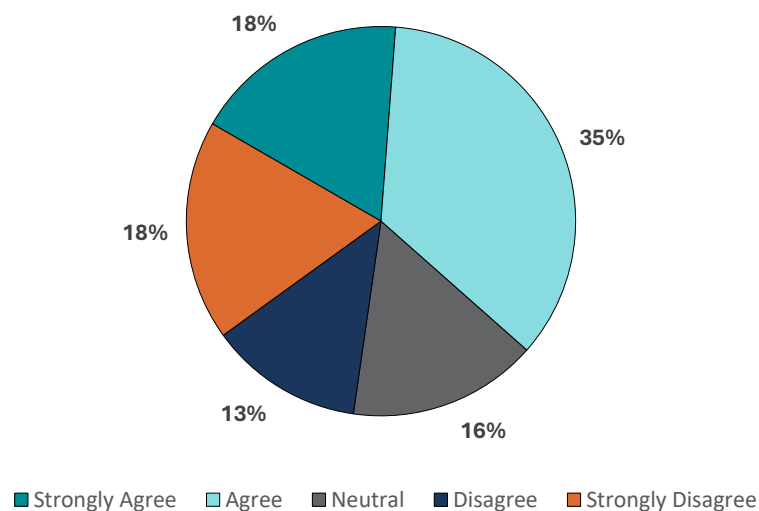
The most common themes were:

Theme	No. of responses
Recording of CPD cycles – time consuming process, streamline requirements	10 of 50
Disagreement with annual submission of CPD records	8 of 50
Preference for CPD contact hours/points or credit-based system/upload of certificates of attendance	7 of 50

All comments are available upon request.

Question 16: The proposed changes to the legislation will link a pharmacist's ongoing registration and their engagement with CPD? Do you believe this is proportionate?

Figure 6: Linking Pharmacist Registration and CPD



Of the 235/239 responses to this question:

- 42/235 (18%) respondents selected 'Strongly Agree'
- 83/235 (35%) respondents selected 'Agree'
- 37/235 (16%) respondents selected 'Neutral'
- 30/235 (13%) respondents selected 'Disagree'

- 43/235 (18%) respondents selected ‘Strongly Disagree’

Question 17: Please state the reason for your answer or any additional comments.

81/235 of the respondents to the previous question stated a reason for their answer or provided additional comments.

The most common themes supportive of linking a pharmacist's ongoing registration and their engagement with CPD were:

Theme	No. of responses
Appropriate – need to keep up to date, uphold high standards of pharmacy profession	16 of 81

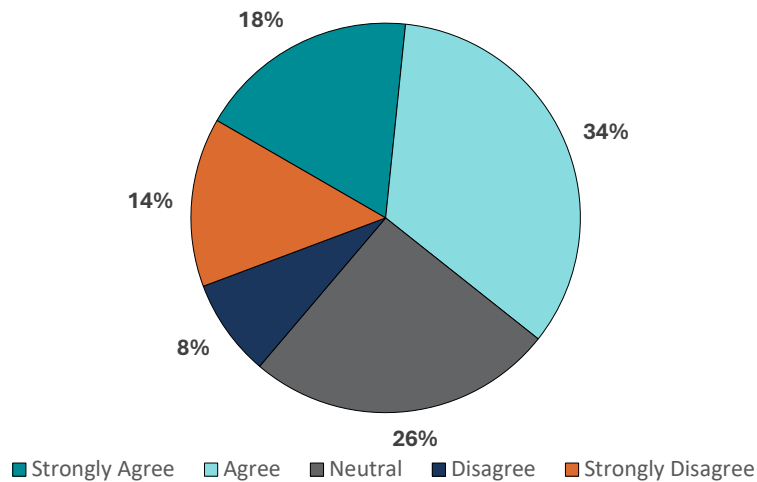
The most common themes not supportive of linking a pharmacist's ongoing registration and their engagement with CPD were:

Theme	No. of responses
Regulatory/Administrative burden – increased stress, pressure and workload for pharmacists, not necessary/appropriate/fair	28 of 81
Exemptions needed – retired, sick leave, maternity leave, travel etc	7 of 81
Disagreement with annual submission	6 of 81
Recording of CPD – time to write up cycles,	4 of 81

All comments are available upon request.

Question 18: The proposed changes to the legislation will link a pharmaceutical assistant's ongoing registration and their engagement with CPD? Do you believe this is proportionate?

Figure 7: Linking Pharmaceutical Assistant Registration and CPD



Of the 235/239 responses to this question:

- 43/235 (18%) respondents selected 'Strongly Agree'
- 80/235 (34%) respondents selected 'Agree'
- 60/235 (26%) respondents selected 'Neutral'
- 19/235 (8%) respondents selected 'Disagree'
- 33/235 (14%) respondents selected 'Strongly Disagree'

Question 19: Please state the reason for your answer or any additional comments.

45/235 of the respondents to the previous question stated a reason for their answer or provided additional comments.

The most common theme supportive of linking a pharmaceutical assistant's ongoing registration and their engagement with CPD was:

Theme	No. of responses
Appropriate – will demonstrate engagement, to uphold high standards	8 of 45

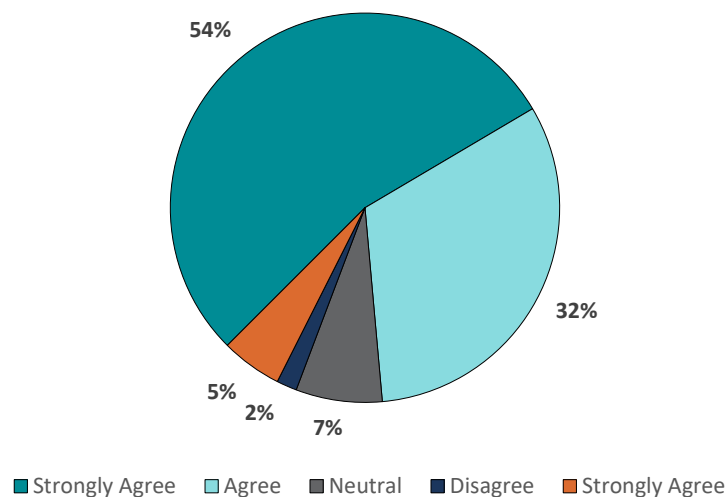
The most common theme not supportive of linking a pharmaceutical assistant’s ongoing registration and their engagement with CPD were:

Theme	No. of responses
Regulatory/Administrative burden – unnecessary, not fair, stressful, increased pressures	5 of 45

All comments are available upon request.

Question 20: The proposed changes to the legislation will provide flexibility to accommodate pharmacists and pharmaceutical assistants with special circumstances who are not able to engage with CPD in a given year. Do you believe this is proportionate?

Figure 8: Flexibility for special circumstances



Of the 237/239 responses to this question:

- 128/237 (54%) respondents selected ‘Strongly Agree’
- 76/237 (32%) respondents selected ‘Agree’
- 17/237 (7%) respondents selected ‘Neutral’
- 4/237 (2%) respondents selected ‘Disagree’
- 12/237 (5%) respondents selected ‘Strongly Disagree’

Question 21: Please state the reason for your answer or any additional comments

68/237 of the respondents to the previous question stated a reason for their answer or provided additional comments.

The most common themes supportive of providing flexibility to accommodate pharmacists and pharmaceutical assistants with special circumstances who are not able to engage with CPD in a given year were:

Theme	No. of responses
Flexibility needed to accommodate special circumstances – illness, maternity leave, travel, bereavement, caring responsibilities	47 of 68
Need for clear exemption criteria	3 of 68

One other predominant theme in response to this question was as follows:

Theme	No. of responses
Negative comments on annual submission of CPD records	7 of 68

All comments are available upon request.

Question 22: The full text of the proposed changes to the Registration Rules is provided. Please provide any comments you may have on the text or drafting of the rules, that you wish to be considered. If you have any additional comments, you can also provide them here.

25/239 respondents provided a response to this question.

The most common themes were:

Theme	No. of responses
Requests for more information	4 of 25

Need for alignment with CPD requirements of other healthcare professionals	3 of 25
Negative comments on annual submission of CPD records	3 of 25
Role for pharmaceutical assistants as part of peer review of CPD submissions	2 of 25
Preference for CPD contact hours/points or credit-based system/upload of certificates of attendance	2 of 25

All comments are available upon request.

#### 4.2 Email Responses

10 responses were received via email. The email responses included 7 responses provided by individuals and 3 responses provided on behalf of organisations, including:

- Irish Pharmacy Union (IPU)
- Health Service Executive, Antimicrobial Resistance and Infection Control (AMRIC) Team
- Health Service Executive, Access and Integration Drug Management Programme.

The responses received by email are broadly in line with the responses received via the online survey. However, several disparate issues were raised as follows:

Theme
Preference for inputs-based approaches to CPD e.g. Multiple-Choice Quizzes (MCQ's)
Need for ongoing Antimicrobial Stewardship education and training for all healthcare professionals
Support for removal of Practice Review from the CPD system for pharmacists
Regulatory/Administrative burden – increasing workload and pressures
Disagreement with linking registration and CPD

Disagreement with annual submission of CPD records by pharmacists/pharmaceutical assistants
Pharmacy Workforce shortages
Relevance of CPD model for pharmacists in non-patient facing roles – need for guidance/support
Support for introduction of a CPD system for pharmaceutical assistants
Agreement that flexibility is needed for the delivery of the CPD system (outsourced mechanism and policy)
Recording of CPD – need for streamlining, minimising time burden, make more user friendly and fit for purpose
Support for policy-based approach to quality assurance of CPD activities
Support for self-assessment against CPD policies, rather than just Core Competency Framework (CCF) for Pharmacists
Support for availability of ePortfolio on mobile devices
Proportionate requirements needed for annual CPD submission
Support for linking registration and CPD
Need for robust communication strategy to support implementation of the changes
Expanded scope of pharmacists for pharmacists – will require a more agile approach to upskilling and provision of information
Utility of introducing a CPD system for the limited number of pharmaceutical assistants remaining on the register
Delivery of the CPD system – more information needed on potential changes
Need to introduce CPD for pharmacy technicians/other pharmacy staff

## 5. Discussion

We appreciate and acknowledge all of the feedback received during the public consultation period. The feedback received reflects a range of sentiments regarding the proposed changes to the CPD system for pharmacists and for the development and implementation of a CPD system for pharmaceutical assistants. This feedback is briefly discussed thematically below.

### 5.1 Removal of Practice Review from the CPD system for pharmacists

The public consultation response reflects strong support for the removal of Practice Review from the CPD system for pharmacists with 85% of respondents to the online survey indicating they ‘Strongly Agree’ or ‘Agree’ with this proposed change.

In general, respondents expressed views that Practice Review was not necessary, was stressful, and created regulatory burden for pharmacists in terms of securing locum cover, travel and accommodation costs and time off work to attend the event in Dublin.

The removal of Practice Review is in line with the policy direction previously approved by the PSI Council.

### 5.2 Annual Submission of CPD Records by pharmacists

The public consultation response reflects mixed views on the proposal to move to annual submission of CPD records by pharmacists with 40% of respondents to the online survey indicating they ‘Strongly Agree’ or ‘Agree’ with this proposed change, 10% of respondents indicating ‘Neutral’ and 50% of respondents indicating they ‘Disagree’ or ‘Strongly Disagree’ with this proposed change.

Respondents who were supportive of the move to annual submission of CPD records by pharmacists indicated that this would be appropriate, however responses suggested that consideration should be given to ensure that the number of CPD cycles required to be submitted annually was reduced from the number of cycles that were required to be submitted once in every five-year period.

Respondents who were not supportive of the move to annual submission of CPD records by pharmacists cited a range of reasons including the potential for it to increase the workload and put pressure on pharmacists, and a sentiment that annual submission of CPD records was too frequent and onerous. Respondents provided extensive feedback on the current structures for recording of CPD cycles in the ePortfolio system. Many respondents indicated a preference for inputs-based CPD systems which comprise of a defined number of contact hours or points per year, though this has not formed part of the policy direction for the CPD system.

The move to annual submission of CPD records by pharmacists is in line with the policy direction previously approved by the PSI Council. Moving to an annual submission of CPD records by all

pharmacists will bring the CPD model in line with CPD models for health and social care professionals both nationally and internationally. It will also support ongoing continuous engagement by pharmacists with learning and development activities.

The concerns raised regarding annual submission are noted. This will be kept under review by the PSI Council in the relevant CPD review policy for pharmacists. Setting out of the CPD requirements in a CPD review policy will provide the PSI Council with flexibility and agility to remain responsive to the expanded scope of practice for pharmacists and the changing healthcare landscape.

### 5.3 Annual Submission of CPD Records by pharmaceutical assistants

The public consultation response reflects more positive response balance on the proposal to require annual submission of CPD records by pharmaceutical assistants with 59% of respondents to the online survey indicating they 'Strongly Agree' or 'Agree' with this proposed approach, 22% of respondents selecting 'Neutral' and 19% of respondents selecting 'Disagree' or 'Strongly Disagree' with this proposed approach.

Respondents who were supportive of annual submission of CPD records by pharmaceutical assistants indicated that this would be appropriate for pharmaceutical assistants to keep up to date. Other respondents expressed sentiments that the CPD requirements for pharmacists and pharmaceutical assistants should be closely aligned.

Respondents who were not supportive of annual submission of CPD records by pharmaceutical assistants felt that it was too frequent. Other respondents queried the utility of introducing a CPD system for the limited number of pharmaceutical assistants remaining on the register.

The concerns raised regarding annual submission are noted, however, this will be kept under review by the PSI Council in the relevant CPD review policy for pharmaceutical assistants. This will provide the PSI Council with flexibility to change the requirements, where necessary and appropriate.

### 5.4 Delivery mechanism for the CPD system

The public consultation response reflects strong support for the CPD system to continue to be delivered by the Irish Institute of Pharmacy (IIOp), or other mechanisms where an outsourced mechanism is not possible, with 67% of respondents to the online survey selecting either 'Strongly Agree' or 'Agree'.

Respondents who were supportive of the proposal for the CPD system to continue to be delivered by the IIOp, or other mechanisms, expressed positive comments on the IIOp in terms of its separation from PSI, support provided and quality CPD offering and resources.

There is an ongoing preference for the PSI Council to utilise the outsourced arrangement of the IIOp for the implementation and delivery of the CPD system, however, this is subject to successful

procurement processes, contract negotiation and agreement on associated funding and resources, now and into the future. The proposed changes will provide the PSI Council with flexibility to consider alternative delivery mechanisms for the CPD system, where necessary.

### 5.5 Policy-based approach to the quality assurance of CPD activities

The public consultation response reflects mixed views on the proposal to introduce a policy-based approach to the quality assurance of CPD activities, rather than legislative accreditation standards. 49% of respondents to the online survey selected 'Strongly Agree' or 'Agree', 37% of respondents selected 'Neutral', while 15% of respondents selected 'Disagree' or 'Strongly Disagree'.

A number of respondents provided comments which indicated that they were not clear of the potential impact of this proposed change.

Comprehensive [FAQ's](#) to address key questions and explain the changes being proposed for the CPD system were made available on the public consultation webpage, though this may not have been noted or adequately clear to respondents.

The proposal to move to a policy-based approach for quality assurance of training follows on from a research paper approved by the PSI Council in April 2024. Quality assuring training through a quality assurance policy will provide greater flexibility and responsiveness in training delivery modalities, based on the needs of the pharmacy profession.

### 5.6 Full text of draft CPD rules

50/239 (21%) of respondents to the online survey provided further comments on the full text of the draft CPD rules. Respondents provided commentary on the need to streamline structures and processes for the recording of CPD cycles, indicating that the current system is time consuming. Some respondents provided further commentary on their disagreement with annual submission of CPD records and others re-iterated their preference for inputs-based approaches to CPD, including contact hours, points or credit-based systems which enables practitioners to upload certificates of course attendance, rather than the need to develop written reflective CPD cycles.

These comments are appreciated and noted.

### 5.7 Linking ongoing registration and CPD for pharmacists

The public consultation response reflects mixed views on the proposal to link a pharmacists ongoing registration with CPD. 53% of respondents to the online survey selected 'Strongly Agree' or 'Agree', 16% of respondents selected 'Neutral', while 31% of respondents selected 'Disagree' or 'Strongly Disagree'.

Respondents who were supportive of the proposal to link a pharmacist's ongoing registration with the requirement to engage with CPD indicated that they consider this appropriate to ensure pharmacists are keeping up to date and to continue to uphold the high standards of the pharmacy profession.

In general, respondents who were not supportive of the proposal to link a pharmacist's ongoing registration with the requirement to engage with CPD indicated that they consider this will increase regulatory and administrative burden for pharmacists, including increasing stress, pressures and workload for pharmacists.

Engagement and compliance levels by pharmacists with the current CPD system remains very high year-on-year. Currently, fitness to practice processes are used in circumstances where a pharmacist, who does not have extenuating circumstances, fails to engage with the CPD system. The independent [review of the CPD model for pharmacists](#), however, recommended that linking registration and CPD compliance would enhance the efficiency and effectiveness of the CPD model, and this aligns with national and international practice. The proposal to link a pharmacist's ongoing registration with CPD is in line with the policy direction previously approved by the PSI Council.

## 5.8 Linking ongoing registration and CPD for pharmaceutical assistants

The public consultation response reflects mixed views on the proposal to link a pharmaceutical assistant's ongoing registration with CPD. 52% of respondents to the online survey selected 'Strongly Agree' or 'Agree', 26% of respondents selected 'Neutral', while 22% of respondents selected 'Disagree' or 'Strongly Disagree'.

Respondents who were supportive of the proposal to link a pharmaceutical assistant's ongoing registration with the requirement to engage with CPD indicated that they consider this appropriate to demonstrate engagement and uphold high standards.

In general, respondents who were not supportive of the proposal to link a pharmaceutical assistant's ongoing registration with the requirement to engage with CPD indicated that they consider this will increase regulatory and administrative burden for pharmaceutical assistants, which will lead to increased levels of stress and pressures for pharmaceutical assistants.

## 5.9 Flexibility to accommodate pharmacists and pharmaceutical assistants with special circumstances

The public consultation response reflects strong support for the proposal to provide flexibility to accommodate pharmacists and pharmaceutical assistants with special circumstances who are not able to engage with CPD in a given year. 86% of respondents to the online survey selected 'Strongly Agree' or 'Agree', 7% of respondents selected 'Neutral', while 7% of respondents selected 'Disagree' or 'Strongly Disagree'.

Respondents who were supportive of the proposal to provide flexibility to accommodate pharmacists and pharmaceutical assistants with special circumstances cited a range of reasons why this is needed including illness, maternity leave, bereavement, caring responsibilities and travel.

The proposal to provide flexibility to accommodate pharmacists and pharmaceutical assistants with special circumstances who are not able to engage with CPD in a given year, is in line with the policy direction previously approved by the PSI Council and is currently provided for within the current CPD system for pharmacists.

### 5.10 Full text of the proposed changes to the Registration Rules

25/239 (10%) of respondents to the online survey provided further comments on the full text of the draft Registration rules. Respondents provided commentary on a range of issues under this section, including re-iterating comments on support for inputs-based CPD systems, requests for more information, negative comments on the proposal to move to annual submission of CPD records, as well as a potential role for pharmaceutical assistants in the peer review of CPD submissions of pharmaceutical assistants.

These comments are appreciated and noted.

## 6. Conclusion

All feedback received is noted and appreciated.

The feedback was considered and discussed by the PSI Regulatory and Professional Committee at its meeting of 20 February.

The feedback was then considered and discussed by the PSI Council at its meeting of 6 March 2025. The Council approved this consultation report and proposed amendments to the Pharmaceutical Society of Ireland (Continuing Professional Development) and Pharmaceutical Society of Ireland (Registration) Rules, at its meeting of 6 March

The proposed amendments to the rules will now be submitted to the Minister for Health for her consideration and consent, in accordance with Section 11(5) of the Pharmacy Act 2007.

# Appendix 1

STATUTORY INSTRUMENTS.

**S.I. No. [ • ] of 2024**

---

PHARMACEUTICAL SOCIETY OF IRELAND (CONTINUING PROFESSIONAL  
DEVELOPMENT) (AMENDMENT) RULES 2024

**(Prn. [ • ])**

PHARMACEUTICAL SOCIETY OF IRELAND (CONTINUING PROFESSIONAL DEVELOPMENT) (AMENDMENT) RULES 2024

The Council of the Pharmaceutical Society of Ireland, in exercise of the powers conferred on the said Society by section 11 of the Pharmacy Act 2007 (No. 20 of 2007) (as adapted by the Health and Children (Alteration of Name of Department and Title of Minister) Order 2011 (S.I. No. 219 of 2011)), with the consent of the Minister for Health, hereby makes the following rules:-

*Citation*

1. (1) These Rules may be cited as the Pharmaceutical Society of Ireland (Continuing Professional Development) (Amendment) Rules 2024.

(2) The Principal Rules and these Rules may be cited together as the Pharmaceutical Society of Ireland (Continuing Professional Development) Rules 2015 and 2024.

*Interpretation*

2. In these Rules “Principal Rules” means the Pharmaceutical Society of Ireland (Continuing Professional Development) Rules 2015 (S.I. No. 553 of 2015).

*Amendment of Rule 3 of Principal Rules*

3. Rule 3 of the Principal Rules is amended—

(a) in the definition of “CPD” by inserting “and pharmaceutical assistants” after “pharmacists”,

(b) by inserting after the definition of “CPD” the following definitions:

“CPD review policy for pharmaceutical assistants” means the policy referred to in Rule 5(b);

“CPD review policy for pharmacists” means the policy referred to in Rule 5(a);”,

(c) by deleting the definitions of “criteria” and “Executive Director”, and

(d) by substituting for the definition of “Register of Pharmacists” and “Register of Retail Pharmacy Businesses” the following definitions:

“‘Register of Pharmaceutical Assistants’, ‘Register of Pharmacists’ and ‘Register of Retail Pharmacy Businesses’ mean the relevant registers established under section 13(1)(a) of the Act;

‘registered pharmaceutical assistant’ means a person whose name is entered in the Register of Pharmaceutical Assistants;”.

*Amendment of Parts 2 and 3 of Principal Rules*

4. The Principal Rules are amended by substituting for Parts 2 and 3 the following:

*“PART 2*

*DELIVERY OF CPD SYSTEM AND QUALITY ASSURANCE*

*Delivery of CPD system*

4. (1) For the purpose of discharging the Society’s functions under section 7(1)(d) of the Act, the Council may establish, in the form of a management arrangement, the Irish Institute of Pharmacy, to arrange for the implementation and delivery of the CPD system, as determined by the Council, and the engagement by pharmacists and pharmaceutical assistants with such system.

(2) Where the Council establishes the Institute of Pharmacy in accordance with paragraph (1), the Council may, from time to time, appoint a corporate body as the Managing Body of the Institute, tasked with providing facilities and services for the Institute of Pharmacy, and the Institute shall implement and deliver the CPD system in accordance with annual work plans approved by the Council.

*CPD review policies*

5. For the purpose of discharging the Society’s function under section 7(1)(d) of the Act, the Council shall—

- (a) approve a CPD review policy for pharmacists, setting out the requirements and procedures for pharmacists to continue their professional development, having regard to the Core Competency Framework for Pharmacists, any other competency frameworks that may be in force and the code of conduct, and
- (b) approve a CPD review policy for pharmaceutical assistants, setting out the CPD model for pharmaceutical assistants and the CPD themes to be used by pharmaceutical assistants in determining their learning and development needs.

*Quality assurance policy*

6. For the purpose of discharging the Society’s function under section 7(1)(d) of the Act, the Council shall approve a policy of quality assurance processes for CPD activities delivered through the Institute which shall—

- (a) cater for a range of CPD activities, which may include activities such as online training programmes, multi-practitioner programmes, webinars and workshops,
- (b) ensure that CPD activities are of an appropriate quality, and
- (c) be reviewed regularly to ensure it remains fit for purpose in line with changing CPD needs and formats, and ongoing developments in the sector.

*PART 3*

*CPD OBLIGATIONS OF PHARMACEUTICAL ASSISTANTS*

*CPD obligations of pharmaceutical assistants*

7. (1) With a view to implementing learning within their professional practice, improving outcomes for patients and maintaining professional competence, pharmaceutical assistants shall undertake appropriate CPD.

(2) The CPD undertaken shall be based upon a self-reflective, portfolio based model, using CPD themes, as set down in the CPD review policy for pharmaceutical assistants by the Council , to determine learning and development needs.

(3) Where the CPD system in respect of pharmaceutical assistants is delivered by the Institute—

- (a) every person whose name is registered in the Register of Pharmaceutical Assistants shall be registered with the Institute and such registration with the Institute shall be valid for so long as the person's name is entered in the Register of Pharmaceutical Assistants,
- (b) the Council shall, on the re-registration or restoration of a person to the Register of Pharmaceutical Assistants, inform the pharmaceutical assistant of his or her registration with the Institute, subsequent to which the responsibility for ongoing engagement with the Institute shall remain with the pharmaceutical assistant,
- (c) the Institute shall establish and maintain an electronically accessible CPD portfolio, to be known as an "ePortfolio", for each pharmaceutical assistant registered with it,
- (d) the contents of the ePortfolio shall be the sole property of the pharmaceutical assistant concerned and subject to their control,
- (e) the pharmaceutical assistant concerned shall, on an annual basis or at such other intervals as may be directed by the Institute in consultation with the Council, submit for review by the Institute such extract(s) of the ePortfolio as may be prescribed by the Council in the CPD review policy for pharmaceutical assistants, save where they have been exempted by the Council from such obligation, in accordance with such policy, due to extenuating circumstances,
- (f) following submission of same, the Institute shall issue a Certificate of Engagement to the pharmaceutical assistant,
- (g) a selection of ePortfolios submitted for review shall be reviewed by the Institute in accordance with the CPD review policy for pharmaceutical assistants,
- (h) the outcome of such review shall be conveyed to the pharmaceutical assistant by the Institute within the timescales set down by the Institute and, where such review is satisfactory, the said outcome shall be issued in the form of a Certificate of Compliance with CPD Requirements,
- (i) the Institute shall refer to the Registrar any instance of non-compliance with this Rule by a pharmaceutical assistant which has not been resolved through the Institute's remediation policy, and

- (j) the Council may request from the Institute information in relation to compliance with this Rule and the issuance of certificates thereunder.”.

*Amendment of Rule 8 of Principal Rules*

5. Rule 8 of the Principal Rules is amended—

- (a) in paragraph (1), by inserting “in accordance with the CPD review policy for pharmacists” after “appropriate CPD”, and
- (b) in paragraph (3), by substituting “CPD review policy for pharmacists” for “Core Competency Framework for Pharmacists”.

*Amendment of Rule 9 of Principal Rules and insertion of Rule 9A into Principal Rules*

6. The Principal Rules are amended by substituting for Rule 9 the following Rules:

*“Scope of this Part*

9. This Part applies where the CPD System in respect of pharmacists is delivered by the Institute pursuant to Rule 4.

*Registration of pharmacist with Institute*

9A. (1) Every person whose name is entered in the Register of Pharmacists shall also be registered with the Institute and such registration with the said Institute shall be valid for so long as the person’s name is entered in the Register of Pharmacists.

(2) The Council shall, on a person’s first registration as a pharmacist, or, as the case may require, on the first continued registration as a pharmacist following the commencement of these Rules, including on the re-registration or restoration of a person to the Register of Pharmacists, inform the pharmacist of his or her registration with the Institute, subsequent to which the responsibility for ongoing engagement with the Institute shall remain with the pharmacist.

*Amendment of Rule 10 of Principal Rules*

7. Rule 10 of the Principal Rules is amended—

- (a) in paragraph (1) by substituting “electronically” for “through the website of the Institute”,
- (b) in paragraph (2) by deleting “absolute”, and
- (c) by inserting after paragraph (2) the following paragraph:

“(3) Every pharmacist shall submit prescribed extracts of their ePortfolio to the Institute for review on an annual basis or at such other intervals as may be directed by the Institute in consultation with the Council, as required under the CPD review policy for pharmacists, save where they have been exempted by the Council from such obligation, in accordance with such policy, due to extenuating circumstances.”.

*Amendment of Rule 11 of Principal Rules*

8. The Principal Rules are amended by substituting for Rule 11 the following:

*“Supervision of CPD activity*

11. (1) Following the submission of the prescribed extracts of a pharmacist’s ePortfolio in accordance with Rule 10(3), the Institute shall issue a Certificate of Engagement by the Institute.

(2) The Council may request from the Institute information in relation to compliance with Rule 10(3) and issuance of Certificates of Engagement under paragraph (1).

(3) A selection of ePortfolios submitted for review pursuant to Rule 10(3) shall be reviewed by the Institute in accordance with the CPD review policy for pharmacists.

(4) The review shall be carried out by the Institute having regard to the objectives and requirements set out in Rule 8 and the CPD review policy for pharmacists.

(5) The outcome of the review carried out under this Rule shall be conveyed to the pharmacist concerned by the Institute within the timescales set down by the Institute and, where such review is satisfactory, the said outcome shall be issued in the form of a Certificate of Compliance with CPD Requirements.”.

*Revocation of Rule 12 of Principal Rules*

9. Rule 12 of the Principal Rules is revoked.

*Amendment of Rule 13 of Principal Rules*

10. The Principal Rules are amended by substituting for Rule 13 the following:

*“Referral of information on non-compliance to Registrar*

13. The Institute shall refer to the Registrar any instance of non-compliance with these Rules by a pharmacist which has not been resolved through the Institute’s remediation policy.”.

I, Minister for Health, consent to the making of the foregoing Rules.

L.S.

Given under the Official Seal  
of the Minister for Health,

[Day] [Month] 2024.

Minister for Health.

L.S. GIVEN under the Official Seal of the Pharmaceutical Society of Ireland,  
[Day] [Month] 2024.

\_\_\_\_\_  
President

\_\_\_\_\_  
Registrar

## **EXPLANATORY NOTE**

*(This note is not part of the Instrument and does not purport to be a legal interpretation).*

These Rules amend the Pharmaceutical Society of Ireland (Continuing Professional Development) Rules 2015 to provide for an updated CPD system in respect of pharmacists and to introduce a CPD system for pharmaceutical assistants.



STATUTORY INSTRUMENTS.

**S.I. No. [ • ] of 2024**



PHARMACEUTICAL SOCIETY OF IRELAND (REGISTRATION) (AMENDMENT) RULES  
2024

PHARMACEUTICAL SOCIETY OF IRELAND (REGISTRATION) (AMENDMENT)  
RULES 2024

The Council of the Pharmaceutical Society of Ireland, in exercise of the powers conferred on the said Society by section 11 of the Pharmacy Act 2007 (No. 20 of 2007) (as adapted by the Health and Children (Alteration of Name of Department and Title of Minister) Order 2011 (S.I. No. 219 of 2011)), with the consent of the Minister for Health, hereby makes the following rules:

1. (1) These Rules may be cited as the Pharmaceutical Society of Ireland (Registration) (Amendment) Rules 2024.

(2) The Principal Rules, Rule 15 of the Rules of 2015, the Rules of 2017, the Rules of 2020, the Pharmaceutical Society of Ireland (Registration) (Amendment) (No. 2) Rules 2020 (S.I. No. 563 of 2020), the Rules of 2023 and these Rules may be cited together as the Pharmaceutical Society of Ireland (Registration) Rules 2008 to 2024 and shall be construed together as one.

3. In these Rules—

“Principal Rules” means the Pharmaceutical Society of Ireland (Registration) Rules 2008 (S.I. No. 494 of 2008);

“Rules of 2015” means the Pharmaceutical Society of Ireland (Continuing Professional Development) Rules 2015 (S.I. No. 553 of 2015);

“Rules of 2017” means the Pharmaceutical Society of Ireland (Registration) (Amendment) Rules 2017 (S.I. No. 100 of 2017);

“Rules of 2020” means the Pharmaceutical Society of Ireland (Registration) (Amendment) Rules 2020 (S.I. No. 316 of 2020);

“Rules of 2023” means the Pharmaceutical Society of Ireland (Registration) (Amendment) Rules 2023 (S.I. No. 452 of 2023).

4. Rule 3(1) (as amended by Rule 3 of the Rules of 2020) of the Principal Rules is amended, in the definition of “CPD Rules”, by inserting “, as amended by the Pharmaceutical Society of Ireland (Continuing Professional Development) (Amendment) Rules 2024 (S.I. No. ~~XXX~~ of 2024)” after “(S.I. No. 553 of 2015)”.

5. Rule 11 (as amended by Rule 15(b) of the Rules of 2015) of the Principal Rules is amended by substituting for paragraph (8) the following paragraph:

“(8) Where an application for continued registration of a pharmacist does not contain, or is not accompanied by, the particulars referred to in paragraphs 7A and 7B of Schedule 2, Rule 12A shall apply to the application.”.

6. Rule 12 of the Principal Rules is amended by inserting after paragraph (3) the following paragraph:

“(3A) Where an application for continued registration of a pharmaceutical assistant does not contain, or is not accompanied by, the particulars referred to in paragraphs 7 and 8 of Schedule 3, Rule 12A shall apply to the application.”.

7. The Principal Rules are amended by inserting after Rule 12 the following Rule:

*“Procedural provisions relating to failure to comply with CPD requirements*

12A. (1) Where an application for continued registration of a pharmacist or pharmaceutical assistant comes within the circumstances referred to in Rule 11(8) or Rule 12(3A), the Council shall, unless there are extenuating circumstances giving rise to such circumstances as provided for in a Council approved policy, inform the applicant by written notice that it proposes to refuse the application.

(2) The notice referred to in paragraph (1) shall state—

- (a) the proposal of the Council,
- (b) the reasons on which the proposal is based, and
- (c) that the applicant has the right to make representations to the Council in response to the proposal within a stated period of time not being less than 28 days from the date of the notice.

(3) A person to whom a notice referred to in paragraph (1) has been issued may, within the period of time referred to in paragraph (2)(c), send written representations to the Council in relation to the proposed refusal of the application for continued registration.

(4) The Council shall, after consideration of—

- (a) any written representations sent to it pursuant to paragraph (3),
- (b) any extenuating circumstances applying to the applicant,
- (c) any CPD subsequently undertaken by the applicant, and
- (d) such other matters as the Council considers appropriate,

decide whether to grant or refuse the application for continued registration”.

8. Schedule 2 to the Principal Rules is amended by substituting for paragraph 7A (inserted by Rule 15(c) of the Rules of 2015) the following:

“7A. Confirmation of their engagement with the Institute of Pharmacy in relation to their obligations under the CPD Rules.”

9. Schedule 3 to the Principal Rules is amended by inserting after paragraph 6 the following paragraph:

“7. Confirmation of their engagement with the Institute of Pharmacy in relation to their obligations under the CPD Rules.”

I, Minister for Health, consent to the making of the foregoing Rules.

L.S.

Given under the Official Seal  
of the Minister for Health,

[Day] [Month] 2024.

Minister for Health.

L.S.

GIVEN under the Official Seal of the Pharmaceutical Society of Ireland,  
[Day] [Month] 2024.

---

President

---

Registrar

## EXPLANATORY NOTE

*(This note is not part of the Instrument and does not purport to be a legal interpretation)*

These Rules amend the Pharmaceutical Society of Ireland (Registration) Rules 2008 to provide that failure to comply with continuing professional development requirements can lead to a refusal to continue the registration of a pharmacist in the Register of Pharmacists or pharmaceutical assistant in the Register of Pharmaceutical Assistants.

These Rules may be cited as the Pharmaceutical Society of Ireland (Registration) (Amendment) Rules 2024.