Clinical pharmacists and indemnity

There are two elements of indemnity which the pharmacist and the GP partnership, as a provider, would need to consider:

1. Indemnifying the service delivery and therefore the partnership. This would protect against complaints and potential litigation for cases in which the pharmacist had played a role (vicarious liability).
2. Indemnifying the individual – personal professional indemnity. This would protect the pharmacist if there were any professional challenges or if they felt a complaint was being handled in a way which was unfair to them.

MDOs offer different types of indemnity packages to practices:

1. Individual indemnity to doctors.
2. Group Indemnity. This provides service delivery and personal protection for doctors and also named clinical staff such as pharmacists. The costs associated with each named practitioner are calculated based on their role.
3. Corporate indemnity. Doctors have personal and service delivery indemnity, but clinical staff such as pharmacists only have service delivery indemnity. Doctors will be named, but the clinical staff are not indemnified by name.

It is important to note that not all pharmacists will be working in the same way and there will therefore be a variation in the associated risk. If the role is medicines management, this would be improving safety and quality and actually reducing the overall risk to the practice. By contrast, if the pharmacist is managing undifferentiated presentations the risk would be much higher and similar to that of a doctor. As pharmacists become embedded in practices it is likely that their role will gradually expand. It is vital that the MDO is kept up to date with the roles of the pharmacists to ensure that adequate cover is maintained.

Pharmacists, even when covered by a corporate indemnity scheme, should consider seeking professional advice to ensure they have the correct scope and level of personal professional indemnification for the role(s) that they undertake. This may involve the need to arrange their own professional indemnity with a specialist pharmacist's indemnity provider. Similarly, practices should seek independent advice to ensure they have suitable indemnity in place to cover for vicarious liability related to clinical pharmacist along with other staff members.

The General Pharmaceutical Council have updated their indemnity guidance for pharmacy professionals working in and outside the NHS which may be useful and is available at the following link:

https://www.pharmacyregulation.org/professional-indemnity-requirements

Agreed by
Yorkshire Office Medical Director
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