

# The Society

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## New scale of fees approved for 2003

The Royal Pharmaceutical Society has gained approval for the proposed increases in its members' and premises fees from 1 January 2003 (*P7*, 17 August, p230).

The Privy Council has approved the proposed Byelaw amendments increasing the membership fees by about 5 per cent. The retention fee for those in full-time employment will rise by 4.8 per cent from £186 to £195 and the part-time fee will increase from £105 to £110. The reduced fee for those aged 60 and over who are not employed in any occupation will rise from £20 to £21.

The fee for new registrants, which was slashed from £185 to £77 earlier this year, will rise by 5.2 per cent to £81. The registration examination fee, which rose at the same time as the the new registrants' fee was reduced, will remain at £125 next year. The late entry and resit fees will stick at £250.

The Society has also learnt that the Secretary of State for Health has approved the

TABLE: FEES FOR 2003

Category	Fee
<i>Members</i>	
Full fee	£195
Part-time	£110
Aged 60 and over and not employed	£21
Unable to practise because of ill health	£21
Overseas	£94
Registration	£81
Reciprocity	£81
Restoration	£372
<i>Premises</i>	
Retention	£101
Registration	£156
Restoration	£323
<i>Preregistration</i>	
Preregistration fee	£100
Examination fee	£125
Resit examination fee	£125
Late entry fee	£250
<i>Adjudication</i>	
Adjudication fee	£210
Adjudication fee interview	£429

proposed 4.1 per cent increases to the pharmacy premises retention fee, which will rise from £97 to £101. Other fees relating to premises will rise by about the same percentage.

The Society says that the new fee structure is based upon a rigorous budgeting process to ensure that costs are retained at a level that enables necessary work to be carried out while obtaining the best value. The work programme for 2003 includes progressing the Society's modernisation programme, working to comply with new legislation, implementing the programme for continuing professional development that began this year, improving management of the membership database and continuing the renovation of the headquarters building.

The budget also aims to produce a moderate operating surplus to help restore the Society's reserves to a prudent level.

*Article, p826*  
*News Feature, p804*

## Council consults on ending elections by STV

The Council of the Royal Pharmaceutical Society has started the process of changing the Society's Byelaws so as to discontinue the use of the single transferable vote system in the elections of Council members and auditors.

The Council decided at its October meeting (*P7*, 12 October, p545) that it would seek to revert to the so-called "first past the post" system, in which voters have one vote for each vacant place. The Council made its decision against the recommendation of its modernisation steering group, which favoured retaining the STV system for elections to the future Council.

At its meeting this month, the Council approved the wording of an Official Notice (p831) giving the required 60 days' notice of its intention to seek Privy Council approval for the necessary Byelaw change. If the Privy Council approves the amendment without delay, the 2003 Council election will be held under the revised system, ending more than a quarter of a century of elections by the STV system.

## Earlier fellowship of Society now possible

The Privy Council has approved an amendment to the Royal Pharmaceutical Society's Byelaws to allow pharmacists to be designated as fellows of the Society earlier in their careers than hitherto. The amendment reduces from 20 years to 12 years the minimum length of membership before a member can be considered by the Panel of Fellows for designation as a fellow.

The Society's Council had sought the

change after its August meeting (*P7*, 17 August, p229). It was considered that a 20-year rule is inhibiting when pharmacists make outstanding contributions to the profession early in their careers. The Council had previously agreed to the change in principle at its meeting in February (*P7*, 23 February, p263), pending preliminary discussions with the Privy Council.

*New fellows, p828*

## Move to end disclosure of members' addresses

The Council of the Royal Pharmaceutical Society is seeking a change to the Society's Byelaws to end the disclosure of members' full addresses in the printed Annual Register of Pharmaceutical Chemists. The Society proposes that only the postal town element of the address should be published in future.

The move aims to allay concerns about personal safety that inhibit some pharmacists from submitting their home address as their registered address. The Society wants pharmacists to register their personal residential addresses because home addresses are more likely to be kept up to date and allow members

to be contacted more readily and directly.

The proposed change will bring the Society in line with other regulatory bodies, which publish postal towns rather than the full addresses of their members.

*Official Notice, p831*

# Why we need a pharmaceutical register that gives reliable information

*This week pharmacists and pharmacy owners should receive their annual retention fee notices. This article, prepared in the Royal Pharmaceutical Society's Professional Standards Directorate, sets out why the Society's registers are important to the profession and describes the responsibilities that pharmacists and pharmacy owners have to ensure that they provide accurate, relevant and up-to-date information for inclusion in the Register*

The Register of Pharmaceutical Chemists is not simply a list of names, addresses and dates that is published and printed annually. It is a statutory database that is updated on an ongoing basis throughout the year with the prime purpose of providing an assurance to the public that pharmacists in practice are registered health care professionals. Future developments arising from the modernisation of professional self-regulation will mean that the register will become more dynamic, more complex and more important.

Using its recent workforce census, the Society has begun the process of checking and validating the data currently held on the register and will follow up notification of changes in the coming months. It will also review what additional information will need to be collected in the future and how this is best done (P7, 31 August, p302).

## WHY KEEP A REGISTER?

Why do we have a Register of Pharmaceutical Chemists? The primary reason for keeping the register is to provide reassurance to the public that any person who describes him or herself as, or practises as, a pharmacist in Britain has met the recognised entry standards relating to health, character and education and is bound by the profession's Code of Ethics. The register therefore provides the public with a measure of reassurance regarding the conduct and competence of all pharmacists.

The maintenance of an accurate register is fundamental to the functions undertaken by the Society in its role as a regulatory body. Many of the functions carried out by the Society support the creation and maintenance of the register. For example, the accreditation of the undergraduate degree programmes, the oversight of the preregistration programme and examination and the administration of the overseas registration and reciprocity arrangements are all designed to ensure that the people whose names appear on the register have met the requisite entry standards. The disciplinary processes and the forthcoming health committee ensure that only those who are fit to practise remain on the register.

In the future, the register will need to reflect more accurately continuing compe-



*The Annual Register of Pharmaceutical Chemists: not just a list of names, addresses and dates*

tence and such things as specialisation. These changes follow on from new public expectations of all health professional regulatory bodies and from Government policy to modernise the National Health Service and extend the roles of health professionals, including pharmacists, into new roles such as prescribing.

As the Society continues to develop its continuing professional development programme, the Council will be considering issues such as the revalidation of pharmacists as a condition of continuing practice. As the register itself becomes more detailed, the processes and mechanisms for maintaining it will become more complex.

## NEED FOR ACCURACY

The Society has always taken its role as a registration and regulatory body seriously. The accuracy of the register and the effectiveness of the processes that support its creation and maintenance are of crucial

importance to the Society, to pharmacists and to the public. Any failure by the Society to maintain an accurate and up-to-date register will, in the future, be an issue that will be pursued through the Council for the Regulation of Health Care Professionals.

Regulators need to be in a position to contact any registered health care professional in a timely manner. In the case of the Society this contact includes communicating official notices, disseminating changes in professional guidance and standards, issuing annual retention fee demands, following up complaints and processing disciplinary cases.

## PHARMACISTS' RESPONSIBILITIES

All pharmacists have a responsibility to notify the Society of any changes in circumstance that might affect the details recorded about them in the register. The following section outlines the current requirements and indicates some areas where the Society will be seeking to implement change.

**Registered name** It is important that the name that appears on the register is the name under which the pharmacist practises or is known. Confusion may arise if a pharmacist is known by, and practises under, a name other than that which appears in the register. In such a situation it may not be possible for an employer to verify readily a pharmacist's registration status.

Any pharmacist who changes the name under which he or she practises or who wishes the register to reflect the award of a PhD should provide documentary evidence to the Society's registration section. Details are available on the Society's website (see panel).

**Registered address** As health care professionals, pharmacists are accountable for their conduct 24 hours a day and seven days a week. This is the basis of pharmacists' con-

## Contacting the Society's registration section

Further information about registration matters is available by post, e-mail or fax from the Registration Section, Royal Pharmaceutical Society, 1 Lambeth High Street, London SE1 7JN (fax 020

7582 4279; e-mail [registration@rpsgb.org.uk](mailto:registration@rpsgb.org.uk)).

Information is also available from the registration section of the Society's website ([www.rpsgb.org.uk/society](http://www.rpsgb.org.uk/society)).

tract with society, which the Society has the duty of upholding. It is therefore important that the registered address is one at which the pharmacist can be contacted in a timely manner, which is most likely to be a pharmacist's personal residential address.

Currently the address provided for inclusion in the register is at the discretion of the pharmacist. Any recognised postal address can be provided — not necessarily a personal residential one. Preliminary results from the census indicate that around 8 per cent of pharmacists do not currently provide a personal residential address but choose instead to give a work address.

The Society recognises that a number of factors may determine which address a pharmacist provides. They include concerns for safety and privacy if a personal residential address is published, a wish to be included within a branch of the Society near work rather than near home, and a wish to receive *The Pharmaceutical Journal* at work and not at home.

To address issues of safety and privacy, the Society is seeking to change its Byelaws (see news item, p825, and Official Notice, p831) so that the address in the published register is restricted to the postal town, as is currently the case with the version of the register accessible on the Society's website. So far as issues such as branch membership and mailings are concerned, the Society is also exploring options for holding a second and separate address for such purposes.

In the meantime, all pharmacists should ensure that the address the Society holds is one at which they can be contacted reliably and that it is accurate and up to date. Pharmacists wishing to amend their registered address should notify the registration section of the new address. Notification must be in writing, but this can include notification by e-mail or fax. It is not possible to action amendments to the register that have not been submitted in writing.

Members should note that the workforce census form circulated recently is not a

valid method for notifying the Society of a change of address. Any change of address included on a census form needs to be provided directly to the registration section at the Society (see above) in order to effect a change to the register.

Because demands for 2003 retention fees have now been despatched to registered addresses, any pharmacist or pharmacy owner who has recently changed addresses and has not notified the Society in writing is advised to ensure that they have made suitable arrangements for mail to be forwarded.

**Register of Pharmacy Premises** Pharmacy owners are reminded that pharmacy premises retention fees for 2003 become due on 1 January 2003. Retention fee demands have already been sent to the pharmacist's registered address in the case of sole proprietors or the company's registered address in the case of bodies corporate. Where a single registered company address which covers a number of premises is provided — particularly if this is an external address such as an accountant's office — superintendent pharmacists or company owners must ensure that arrangements have been made to deal with the retention fee demand(s) expediently.

Any changes to company registration details, including changes of superintendent pharmacist, must be notified to the registration section accurately and in a timely manner. Standard forms are available from the Society's website. Failure to notify changes in the registration details or to pay retention fees may mean that the business is being conducted unlawfully.

**Category of retention fee** Payment of an appropriate annual retention entitles an eligible individual to practise as a pharmacist in Britain. A pharmacist who has retired from work or who cannot work because of illness or who lives overseas may be eligible to pay a reduced fee to remain on the register. The five categories of retention fee areas follows:

<i>Full fee</i>	Paid by any person in paid employment in any occupation, not just pharmacy-related, for more than 13 weeks of the year
<i>Part-time fee</i>	Paid by a person in paid employment in any occupation, not just pharmacy-related, for fewer than 13 weeks of the year
<i>Ill health</i>	Paid by a person who is unable to work in any occupation because of ill health
<i>Retired</i>	Paid by a person who is over 60 years of age and who has declared that he or she is not working in any occupation
<i>Overseas</i>	Paid by a person not resident and not working in any occupation in Britain and who has an overseas address

**Other data** In previous years pharmacists have received additional requests for data along with the retention fee notices, eg, workforce data and special interest group membership. Workforce data have been identified as a priority for developing future strategy and have been collected and analysed as a research project. Special interest group membership information is not being collected as part of the research but will be updated at a later date.

## CONCLUSION

The Register of Pharmaceutical Chemists is the means by which the Society can assure the public that only registered pharmacists are practising. Pharmacists have a responsibility to ensure that they provide accurate, relevant and up-to-date information for inclusion in the register. In line with regulation in other health care professions, the requirements for retention on the pharmaceutical register will be more detailed in the future.

## DEATHS

**Rawlings** On 11 November, Francis Hines Rawlings, FRPharmS, of 38 Keys Avenue, Horfield, Bristol BS7 0HJ. Mr Rawlings registered in 1940 and worked at Southmead Hospital during the 1939–45 war. He took up the post of chief pharmacist at Central Clinic in 1947 and remained there until his retirement. He was secretary of the Bristol branch of the Pharmaceutical Society for many years and was awarded a fellowship in 1978.

**Skilbeck** On 7 October, Albert Henry Skilbeck, MRPharmS, of 24 Aughton Court, Church Road, Upton, Wirral, Merseyside CH49 6JY. Mr Skilbeck registered in 1936.

**Triplett** On 27 September, Donald James Spencer Triplett, of 1 Elgata Court, Sale, Victoria, 3850 Australia. Mr Triplett registered in 1953 and retired from the register in 1964. (*Amended notice*)

## Leicestershire and Rutland branch celebrates Diwali

Pharmacists from the Leicestershire and Rutland branch of the Royal Pharmaceutical Society celebrated Diwali, the Hindu Festival of Lights, on 23 November.

Organised by former branch chairman Rajni Hindocha and community pharmacist Divyesh Shah, the event was the branch's sixth Diwali celebration. The annual event was instigated to provide a shared cultural evening for all pharmacists in the Leicestershire area.

Around 200 pharmacists and their families sat down to dinner at the Wigston Stage Hotel. They were entertained by Asian dancers and musicians. During the evening, events were organised to collect for several charities.

Guests of honour at the celebration included Andy Murdock (superintendent

pharmacist, Lloyds Pharmacy Ltd, and a member of the Pharmaceutical Services Negotiating Committee, and Arthur Daines (UniChem's general manager, sales), both of whom gave speeches. Master of ceremonies was Divyesh Shah.

The branch chairman, Professor David Upton (chief pharmacist, University Hospitals of Leicester NHS Trust) was unable to attend the celebration for a good reason. He was being presented with the 2002 National Jaguar XJS Challenge trophy, which he had successfully defended after winning it at his first attempt in 2001 (*PJ*, 16 March, p377). The Jaguar car Professor Upton drives is sponsored by Mr Hindocha's CAMRx community pharmacy consortium and Eldon Laboratories (part of the UniChem group).

# Seven pharmacists designated as fellows

Seven pharmacists have been designated as fellows of the Royal Pharmaceutical Society by the Society's panel of fellows. They are Professor Michael Aulton, Martin Bennett, David Morgan, Dr Gordon Munro, Kirit Patel, Barbara Stewart and Sean Sweetman.

The following biographical information is based on material provided by the panel of fellows to assist in identifying the pharmacists concerned. It does not necessarily represent the reasons for designation as fellows.

**Professor Michael Aulton**, who registered in 1968, has been head of pharmaceuticals at De Montford University, Leicester, since 1989 and professor of pharmaceutical technology since 1992. He is also head of the graduate school of applied science and was recently appointed head of the professional development institute in the university's faculty of applied science. He has been chairman of the registration committee and the examination board since 2000. He has been an external examiner for degree courses at Manchester, King's College London, Strathclyde, Bradford and Brighton universities.

**Martin Bennett** is a community pharmacist who registered in 1970. A co-founder of Associated Chemists (Wicker) Ltd, the Sheffield consortium pharmacy company, he has been the company's managing director since 1973. He is secretary of Sheffield Local Pharmaceutical Committee and a board member of the Prescription Pricing Authority. He briefly served on the board of the National Pharmaceutical Association.

**David Morgan**, who registered in 1973, is director of pharmaceutical public health and immunisation co-ordinator for the North Wales Health Authority. He is secretary and a governor of the College of Pharmacy Practice and since 1993 has been the CPP's regional adviser for Wales. He has been a member of the North Wales Drug and Alcohol Action Team since 1996. He is secretary of the Society's Clwyd branch. He is a member of the editorial board of the *Journal of Tissue Viability*.

**Gordon Munro**, who registered in 1971, has since 1997 been head of inspection and enforcement for the Medicines Control Agency, where he has also taken a lead role in bringing the British Pharmacopoeia on to a sound business footing. Before joining the MCA he held a series of posts with Glaxo-Wellcome, reaching the position of director of quality.

**Kirit Patel**, who registered in 1974, is managing director of the Day Lewis group of pharmacies. He was elected to the Society's Council in 2000 and was elected Treasurer of the Society in June this year. He has been a member of the Pharmaceutical Services Negotiating Committee since 1998 and is vice-chairman of the Merton, Sutton and Wandsworth Local Pharmaceutical Committee. He has served on the board of the National Pharmaceutical Association since 1992, and was chairman for 1999–2000. He is a trustee of the Pharmacy Practice Research Trust. He is a member of the Small Business Council.

**Barbara Stewart**, who registered in 1966, has since 1989 been a pharmaceutical consultant with Pharmacy Practice Consultants. She is project manager and professional secretary to the Pharmacist Prescribing Task Group (chaired by Dr June Crown). She is the author of part of the project handbook for the Pharmaceutical Services Negotiating Committee's community pharmacy medicines management project. She is a member of the medical/scientific expert committee of the National Eczema Society and a member of the specialist advisory group of the inquiry by the Associate Parliamentary Group on Skin into primary care dermatology services. She is pharmacist smoking cessation adviser in local smoking cessation clinics for Western Sussex Primary Care Trust. She was head of the Society's education division from 1986 to 1989 and is currently secretary of the Society's Worthing and West Sussex branch.

**Sean Sweetman**, who registered in 1975, is editor of Martindale: The Complete Drug Reference. After early experience in community pharmacy, he joined Martindale in 1977. He was an assistant editor and subsequently senior assistant editor for the 29th to 32nd editions of the book, between 1985 and 1999. He was appointed editor in 1999. During work on the 29th edition, he took responsibility for Martindale's new in-house computer and produced the database of Martindale's Datastar and Dialogue online services — an exercise that culminated in the production of the first full text database.

*Official Notice, p831*

## MEDICINES, ETHICS AND PRACTICE

# December cumulative list of amendments

In the first issue of each month *The Journal* updates the guidance on the legal status of medicines published in the 26th (July 2002) edition of 'Medicines, ethics and practice: A guide for pharmacists'. The amendments are given in **bold** type when added to the list and repeat-

ed each month in light type. A product's legal status can be obtained by consulting first the latest amendment list and then the guide. The abbreviations used in the list are explained in the key to annotations in the body of the guide (p27 and p73).

<b>HUMAN MEDICINES</b>	Elidel cream POM	<b>tablets POM</b>	Senokot Double Strength tablets P	Vantage expectorant and decongestant cough syrup P
APO-go pen injector POM	<b>FemSeven Conti patches POM</b>	Merional injection POM	Simple eye ointment P	Vantage extra power pain reliever tablets (16s) GSL
Beechams all-in-one tablets GSL	FemSeven Sequi patches POM	Neoclarityn syrup POM	Soloc tablets POM	Vantage junior expectorant cough syrup GSL
Beechams decongestant plus with paracetamol capsules GSL	Fenogal capsules POM	Nicotinell coated gum	Spiriva inhalation capsules POM	<b>Vaqa Paediatric vaccine POM</b>
Care Cetirizine Hayfever Relief tablets P	Filnarine SR tablets CD POM	GSL	Sudafed 12 Hour Relief tablets P	Varilrix vaccine POM
Casporfungin infusion POM	Imodium Instants tablets GSL	NiQuitin CQ 2mg mint gum GSL	<b>Sustiva capsules entry should read: Sustiva preparations POM</b>	Vfend tablets and infusion POM
Cipralax tablets POM	Invanz infusion POM	NiQuitin CQ 4mg mint gum GSL	<b>Tamiflu capsules POM</b>	ViraferonPeg prefilled pens POM
<b>Codipar Caplets CD Inv POM</b>	Ipcol tablets POM	Nurofen for Children singles sachets GSL	Tracleer tablets POM	Wind-Eze gel caps entry should read: Wind-Eze products GSL
<b>Cuprofen for Children P</b>	Komil 5/40 tablets POM	<b>Omacor capsules P</b>	Tranquilyn tablets CD POM	Xigris infusion POM
Day and Night Nurse capsules P	Lantus injection POM	Pegasys injection POM	Trileptal oral suspension POM	Zomig nasal spray POM
Ebixa tablets and oral drops POM	Lemsip cold + flu Max Strength Direct lemon sachets GSL	Pletal tablets POM	Trintek patches P	
	Lemsip Max Strength sinus relief capsules GSL	Remegel chewy squares	Vantage dry cough syrup P	
	<b>Malarone Paediatric</b>	GSL	Vantage expectorant cough syrup GSL	
		Reminyl oral solution POM		
		Risperdal Consta injection POM		
		Sedonium tablets P		

## STATUTORY COMMITTEE

# Striking-off for Viagra sale to journalist

**A** Borehamwood pharmacist who sold Viagra to a journalist without a prescription and whose record keeping was described as “chaotic” has had his name removed from the register by the Statutory Committee.

At its meeting on 26, 27 and 28 February, the committee inquired into the case of Rajendra G. Shah, of 8 Bush Hill Road, Kenton, Harrow, Middlesex, who is proprietor of a pharmacy at 11 Leeming Road, Borehamwood. A complaint had been received from the Council of the Royal Pharmaceutical Society alleging that Mr Shah had on 27 October 1999 sold five 100mg Viagra tablets to an investigative reporter in the absence of a valid prescription, that he had failed to ensure that accurate records of Viagra transactions were kept, and that he had failed to ensure that emergency supplies made by him complied with the requirements for such supply. It was alleged that these deficiencies might demonstrate that Mr Shah had been guilty of misconduct such as to render him unfit to have his name on the Register of Pharmaceutical Chemists.

Geoff Hudson, of Penningtons (solicitors), appeared in order to present the facts of the case to the committee.

Mr Shah attended the inquiry. He was represented by Alan Landsbury, of counsel, instructed by R. R. Sanghvi & Co (solicitors).

## JOURNALIST SET-UP

Giving the committee's decision, the chairman (Lord Fraser of Carmyllie, QC) said that it did not take much imagination to appreciate that the sale of Viagra tablets to an investigative journalist from the *Sunday People* was a set-up. This was best evidenced

by the fact that, once the sale had been completed, Mr Shah had been lured with a fictitious account of a possible *EastEnders* filming to allow photographs of himself and his pharmacy to be taken. It had been said on Mr Shah's behalf that entrapment by the *Sunday People's* representatives was a mitigating circumstance. Such entrapment by a journalist, apparently based on rumour of what might be obtained from the pharmacy, was of limited application in Mr Shah's case, said the chairman.

Mr Shah had been badgered to supply one Prozac tablet, which he had refused to do. Then repeated requests were made for the supply of Viagra tablets, with the number rising from one to five, and discussions as to the price. Mr Shah had admitted supplying five 100mg Viagra tablets without a prescription and wholly failing to meet any of the conditions making an emergency supply permissible.

When interviewed by one of the Society's inspectors on 14 February 2000, Mr Shah was asked whether any supply of Viagra could be an emergency; he had made no answer. Neither could the committee understand on what basis a request made over two days for one Viagra tablet, expanding to five, during which time there was ample opportunity to consult a doctor, could possibly be described as an emergency. It was impossible to see any consideration present other than a mercenary one.

With regard to Mr Shah's alleged failure to keep accurate records of Viagra transactions, two examples could be noted. For one patient, there had been two prescriptions for Viagra 50mg alongside three entries in the prescriptions register for supply to him of anything between 12 and 21 tablets. Further, a check revealed that, while the wholesaler's records showed supplies of 80 100mg

tablets, Mr Shah's records showed he had dispensed 87 tablets on private prescriptions and eight on National Health Service prescriptions, had supplied five to the *Sunday People* reporter and held stock of 17. Thus, there were 37 more tablets than could be accounted for.

## CHAOTIC RECORD-KEEPING

On the third complaint, of failing to ensure that emergency supplies had been made according to the requirements for such supply, Mr Shah's own evidence had revealed not merely a tale of inadequate recording. It had shown a chaotic, incomprehensible and thoroughly unprofessional record of a string of transactions under the heading “emergency”. Rather than restricting emergency dispensing to the narrow circumstances allowed in ‘Medicines, ethics and practice’, he had allowed it to encompass dispensing of prescription only medicines in an ill-defined range of circumstances, possibly depending on whether he knew the individual demanding the product, and most regularly when a repeat prescription was anticipated.

Even more alarming, continued the chairman, was Mr Shah's attempted explanation that this so-called emergency list contained not only notes of dispensing without prescription but also medication owing to patients, patient enquiries, doctors' queries and requests to doctors for prescriptions. It was a sorry tale of page after page of entries that were at best ambiguous and at worst incomprehensible. And at times, Mr Shah had vacillated, giving his evidence unsatisfactorily.

All three complaints by the Society had been established. The committee ordered that Mr Shah's name be struck off. He had three months to appeal against the decision.

## Pharmacist's alcohol problems lead to striking-off order

**A** pharmacist whose neglect of his post and paperwork through alcohol abuse led to his practising while not on the register has had his name struck off.

At its meeting on 20 February, the committee resumed an inquiry into the case of David E. Bloomfield, whose registered address is 4 Westall Close, West Street, Hertford. A complaint had been received from the Council of the Royal Pharmaceutical Society alleging that Mr Bloomfield, as a result of admitted problems caused by alcohol and debt, had failed to deal with the administration of post and paperwork to do with his professional practice between the end of December 2000 and June 2001. It was also alleged that Mr Bloomfield had practised as a pharmacist between about 14 May and 4 June 2001, during which period his name was not on the register.

Geoff Hudson, of Penningtons (solicitors), appeared in order to present the facts of the case to the committee.

Mr Bloomfield was not present at the inquiry, nor was he represented.

## COMPLIANCE WITH REGULATIONS

The chairman (Lord Fraser of Carmyllie, QC) said that the committee had decided to hear the case in Mr Bloomfield's absence; it had already been adjourned once (from 23 November 2001) and efforts made to serve the notice of inquiry on him had fully complied with the regulations.

Giving the committee's decision, Lord Fraser said it was clear that Mr Bloomfield had failed to deal with his post and paperwork and that the failure appeared to have stemmed from his problems with the exces-

sive consumption of alcohol. Evidence had also been presented that he had indeed practised as a pharmacist between the dates referred to, when his name was not on the register.

Mr Bloomfield's name was ordered to be removed from the register.

The chairman added that the committee recognised that Mr Bloomfield had a number of personal problems to deal with and hoped that he would be given the advice and assistance that could be offered by those involved with the Society. If he sought to have his name restored at some point in the future, as was to be hoped, he was advised that his application should be supported by someone expert in the treatment of drug or alcohol problems.

Mr Bloomfield had three months in which to appeal against the decision.

## “Lackadaisical” response to advice leads to reprimand

A Northumberland pharmacist who was “remarkably lackadaisical” in implementing the Society’s advice on improving his dispensary procedures has been reprimanded following a number of irregularities in medicines dispensing and storage.

At its meeting on 19 February the committee inquired into the case of Martin P. H. Merriman, of “Belvido”, Aydon Road, Corbridge, Northumberland. A complaint had been received from the Council of the Royal Pharmaceutical Society alleging that Mr Merriman had been responsible for a number of irregularities in dispensing procedures at his pharmacy at 4 Town Hall Buildings, Corbridge, on dates between 26 January and 12 April 2001.

The alleged irregularities included the redispensing of patient-returned medicine and the presence on the dispensary shelves of patient-returned and uncollected medicines, date-expired medicines, loose foil strips of medicines, mixed batches of medicines and medicines that did not comply with the labelling regulations. It was also alleged that Mr Merriman had been the pharmacist on duty when promazine syrup 25mg in 5ml had been supplied against the balance of a prescription calling for amantadine syrup 50mg in 5ml.

Geoff Hudson, of Penningtons (solicitors), appeared in order to present the facts of the case to the committee.

Mr Merriman attended the hearing. He was represented by David Aaronberg, of counsel, instructed by Charles Russell (solicitors).

### PROCEDURE REVIEW REQUESTED

The committee heard that on 17 January 2001, following the supply from his pharmacy of outdated magnesium trisilicate

mixture, the Society’s Professional Standards Directorate had written to Mr Merriman requesting that he review his date checking procedures. An “ideal system” had been set out for his information. Mr Merriman had replied on 22 January, indicating that he had addressed the matter.

However, on 26 January a prescription had been dispensed which called for three packs of 60 Persantin Retard 200mg capsules, and one of the three packs supplied bore a label indicating that it had been dispensed on 20 December 2000 from the pharmacy at Hexham general hospital for another patient.

Then, during a visit by inspectors of the Society on 12 April, 18 items of patient-returned or uncollected medicines, 26 items of date-expired medicines and a number of inadequately labelled medicines, including loose foil strips of medicines, were found on the dispensary shelves. The loose foil strips included four strips of 14 Sotacor 160mg tablets from which the batch numbers and expiry date had been cut off. In all, a total of 71 discrepancies had been noted.

Finally, on 21 May 2001, the error in dispensing the balance of promazine syrup had occurred.

Giving the committee’s decision, the chairman (Lord Fraser of Carmyllie, QC) said that what had been revealed was a far from satisfactory state of affairs. Having dispensary shelves in the condition described was to invite errors and thus affect the safety of the public.

Mr Merriman had accepted that there was a significant number of patient-returned medicines on his shelves, where they should not have been. He had also accepted that the date expired medicines and the mixed batches of medicines should not have been in the places where they were

found, although he indicated that he had not wholly understood that the different batches should not have been mixed together.

Commenting on the Sotacor tablet strips from which the batch and expiry dates had been cut off, the chairman said that in some cases that had come before the committee, there had been the implication attached to that removal that it was the intention of the pharmacist to dispense such items, concealing the fact that they were outdated. There was no such evidence in Mr Merriman’s case, he noted.

In the case of the dispensing error where promazine had been supplied instead of amantadine, Mr Merriman had said he thought his preregistration trainee must have made the mistake. He accepted, however, that he had to carry responsibility for that significant error.

### REMARKABLY LACKADAISICAL

The committee felt that Mr Merriman appeared to have been “remarkably lackadaisical” in implementing the advice given by the Society’s Professional Standards Directorate. If the pharmacy had still been in the state it was at the time of the inspectors’ visit in April 2001, the committee would have directed the removal of Mr Merriman’s name from the register. However, new systems had been put in place and were still being improved. Excellent references had been provided on Mr Merriman’s behalf, and he had a wide range of community interests. Nevertheless, his first duty as a pharmacist was to ensure that his pharmacy was run in a smooth and efficient manner with as many opportunities for error as possible eliminated.

Mr Merriman was ordered to be reprimanded.

## Locum did not present “acceptable face” of pharmacy

A locum pharmacist who made dispensing errors and was said to have been rude and aggressive to patients has been reprimanded by the Statutory Committee.

At its hearing on 18 February, the committee inquired into the case of Victor Harari, of 17 Ilkley Drive, Davyhulme, Manchester. A complaint had been received from the Council of the Royal Pharmaceutical Society alleging that, while pharmacist in charge of Lloyds Pharmacy, The Square, Holsworthy, Devon, Mr Harari had committed a number of errors in dispensing prescriptions, had exhibited poor practice in dealing with the supply of and labelling of medicines owing on prescriptions and had been rude and abrupt in dealings with patients and staff.

Geoff Hudson, of Penningtons (solicitors), appeared in order to present the facts of the case to the committee.

Jack McGarva, of Hill Dickinson (solicitors) represented Mr Harari, who was present at the inquiry.

### UNHELPFUL TOWARDS PATIENTS

The inquiry heard that the complaints related to a period between 2 and 14 October 2000, when Mr Harari had been locum pharmacist in charge of the pharmacy. Except for three days of that time he had had no dispensing assistance. The first dispensing error complained of was that, against a repeat prescription calling for Premarin tablets 1.25mg and prednisolone tablets 2.5mg, two containers each containing prednisolone tablets had been supplied. When the patient telephoned the pharmacy to query what had been dispensed Mr Harari had been unhelpful and the patient had taken the tablets to another pharmacist

who had confirmed they were not as labelled. A second complaint concerned a Nomad tray filled by Mr Harari which had been returned because the patient said the medicines it contained were not as prescribed. Thirdly, a prescription for temazepam had been handed out together with the prescription form itself, which should have been retained. An additional complaint was that when patients were due to receive more than one calendar pack of medicines, he had labelled only one of them.

Giving the committee’s decision the chairman (Lord Fraser of Carmyllie, QC) said that although the pharmacy had been described as “busy” it appeared that it dispensed fewer than the average number of prescriptions. However, it was felt desirable that dispensing assistance should have been available to the pharmacist. It appeared that

in the absence of such assistance, Mr Harari had to undertake a wider range of duties than he was accustomed, or willing, to perform. There was also little doubt that Mr Harari had only a faint grasp of the functionality of the pharmacy computer; as a result, unnecessary duplicate orders arrived — possibly twice a day. Further, his relationship with the pharmacy staff was not good; more than one staff member described him as “rude and arrogant”.

#### DISPENSING ERRORS

It was not surprising, continued the chairman, that out of this unsatisfactory situation a number of dispensing errors occurred. With regard to the prescription calling for Premarin and prednisolone it was Mr Harari's contention that what had happened was no more than a switching of labels: Premarin had been labelled prednisolone and vice versa. The evidence, however, was that the bottle labelled Premarin and that labelled prednisolone both contained prednisolone.

In regard to the make-up of a Nomad tray for another patient, it appeared that, after an acrimonious exchange with the patient's friend who had called for it, Mr Harari reluctantly made up the tray. The friend commented that the tray did not “seem to be right” and next day the tray was returned with the complaint that the medicines were wrong. They were then correctly prepared by a dispensing assistant who had been sent from another branch.

It might have been thought that Mr Harari would have made a particular check on what was in the tray but he had simply passed it over to a dispensing technician and told her to “sort it out”. Mr Harari could hardly complain that he did not know what error there was in the tray when he had not attempted to discover for himself what he had originally dispensed.

The complaint about temazepam, a Controlled Drug, arose from the fact that the prescription form had been returned to the patient with the medication. If the prescription had not been endorsed, that would have been a serious matter; as it had been endorsed, the risk was not as great.

So far as Mr Harari's alleged rudeness and aggression were concerned, the Society was properly concerned about pharmacists' attitude to members of the public. It was a serious matter if any pharmacist was so rude and aggressive that people lost confidence in the profession or became reluctant to rely on the wide range of services that pharmacists can offer. Mr Harari had clearly been rude to a number of members of the public.

Finally, Mr Harari had admitted the labelling offence.

Mr Harari had not presented an acceptable face of pharmacy to a small community in Devon, said the chairman. He hoped Mr Harari had some personal misgivings about that. He was now 74 years of age and it might be appropriate for him to reflect on how much longer he should remain in active practice.

The committee reprimanded Mr Harari.

## LAW AND ETHICS BULLETIN

*An occasional feature, prepared in the Royal Pharmaceutical Society's Professional Standards Directorate, to highlight problems and inquiries currently being handled. Previous bulletin items can be found on*

PJ Online at [www.pjonline.com/lawandethics](http://www.pjonline.com/lawandethics)

### Checking nurse prescribers' credentials

Pharmacists are reminded that since 1 April 2002 there have been two levels of nurse prescribers in England and Wales.

Nurses registered as nurse prescribers with the Nursing and Midwifery Council may prescribe the items listed in the Nurse Prescribers' Formulary, which may be found on p773 of the British National Formulary, 44th edition.

Some nurse prescribers have completed further training to allow them to prescribe from the Nurse Prescribers'

Extended Formulary, which may be found on p777 of the BNF 44th edition. The registration of such nurses is annotated to confirm that they are able to prescribe from the extended formulary.

A pharmacist presented with a prescription written by a nurse must make all necessary checks to ensure that the nurse writing the prescription is authorised to prescribe the items ordered. If necessary, a nurse's level of authorisation as a prescriber may be checked with the local primary care trust.

#### OFFICIAL NOTICES

**Communications to the Royal Pharmaceutical Society of Great Britain should be addressed, except where otherwise stated, to the Secretary and Registrar, The Royal Pharmaceutical Society of Great Britain, 1 Lambeth High Street, London SE1 7JN (tel 020 7735 9141; fax 020 7735 7629).**

#### Alterations to the Byelaws:

##### Election of Council and auditors

NOTICE is hereby given in accordance with Section XXVIII of the Byelaws that the Council of the Society has approved proposals to alter the Byelaws concerning the election of the Council and auditors (Section XII) as hereunder and that it intends to make such alterations after the expiry of 60 days from the date of this notice, subject to such amendments as the Lords of the Privy Council may require.

#### SECTION XII

*Paragraph 7* delete the whole paragraph and substitute the words “In the election of members of Council each member shall have seven votes. The seven candidates with the highest number of votes shall be elected. In the election of Auditors each member shall have five votes. The five candidates with the highest number of votes shall be elected.”

*Paragraph 9* delete the words “at each stage of the count”.

#### ANN LEWIS

Secretary and Registrar

*Note: The effect of the Byelaw amendment is to implement the decision of the Council at its October meeting that the “first past the post” system should replace the single transferable vote system in the election of Council members and auditors. See news item, p825.*

#### Alterations to the Byelaws:

##### Annual Register of Pharmaceutical Chemists

NOTICE is hereby given in accordance with Section XXVIII of the Byelaws that the Council of the Society has approved proposals to alter the Third Schedule to the Byelaws, concerning the Annual Register of Pharmaceutical Chemists, as hereunder and that it intends to make such alterations after the expiry of 60 days from the date of this notice, subject to such amendments as the Lords of the Privy Council may require.

#### THIRD SCHEDULE

Amend as follows:

Date of registration	Number	Name	Address (postal town)	Fee paid
F				

F in left margin indicates Fellow of the Royal Pharmaceutical Society

#### ANN LEWIS

Secretary and Registrar

*Note: The effect of the Byelaw amendment is to permit the address required to be published in the Annual Register of Pharmaceutical Chemists to consist of the postal town only. See news item, p825.*

#### New fellows

In accordance with the powers vested in it, the panel of fellows appointed under Section III(4) of the Byelaws has designated the following seven members as fellows of the Royal Pharmaceutical Society. *For distinction in the profession of pharmacy:* David Austin MORGAN, Mold, Clwyd; Dr Gordon MUNRO, Welwyn, Hertfordshire; Kirit Chimanbhai Tulshibhai PATEL, Thornton Heath, Surrey; Mrs Barbara Janice STEWART, Bognor Regis, West Sussex. *For distinction in the science and profession of*

*pharmacy*: Professor Michael Edward AULTON, Leicester. *For distinction in the practice and profession of pharmacy*: Martin BENNETT, Sheffield; Sean Christiaan SWEETMAN, Lambeth, London.

*News item, p828*

**Statutory Committee inquiries**

The Statutory Committee will meet at the Royal Pharmaceutical Society of Great Britain, 1 Lambeth High Street, London SE1, at 10am on Tuesday 10, Wednesday 11 and Thursday 12 December 2002, to hear the following inquiries and applications.

**Tuesday 10 December**

1. A resumed inquiry into a pharmacist convicted of possessing a quantity of cannabis. This inquiry was first heard on 11 December 2001 and adjourned for 12 months.

2. An inquiry into a complaint by the Council of the Society against a pharmacist which includes allegations that the pharmacist's failure to honour contractual commitments in June and September 2002 and the pharmacist's conduct while at work on two days in June 2002 may amount to misconduct. In addition to the new inquiry, the committee will also proceed with hearing the resumed inquiry adjourned on 15 January 2002 until December 2002.

**Wednesday 11 December**

3. An inquiry into a pharmacist convicted of obtaining property by deception. In addition the committee will hear a complaint by the Council of the Society against the pharmacist which alleges that the system of endorsing prescriptions adopted by the pharmacist whereby he obtained an over-

payment from the Prescription Pricing Authority of a sum estimated to be about £40,000 amounts to misconduct.

4. An inquiry into a complaint by the Council of the Society against a pharmacist which alleges that the pharmacist's failure to ensure that all medicines on the dispensary shelves complied with the labelling regulations and the supply of medicines to a patient from which the expiry dates had been removed with the intention of obscuring the fact that the expiry dates had passed, amounts to misconduct.

**Thursday 12 December**

5. An inquiry into a pharmacist convicted of driving with an alcohol level which exceeded the prescribed limit, driving without due care and attention and failing to stop after an accident. In addition the committee will also hear a complaint by the Council of the Society which alleges that the pharmacist's inability to discharge his professional duties while engaged as a locum amounts to misconduct.

6. A resumed application for restoration from a person whose name was removed from the Register, adjourned from Thursday 21 November 2002.

7. To announce the reasoned decision following the hearing of an inquiry into a complaint by the Council of the Society against a pharmacist which included allegations that the dispensing of bisoprolol 10mg tablets labelled with a dose outside of normal prescribing limits, amounted to misconduct.

M. B. PAWLUCZYK (Mrs)  
Secretary to the Statutory Committee

**HEADQUARTERS MEETINGS**

*The following meetings take place at the Royal Pharmaceutical Society's headquarters, London*

Tuesday 10 December  
Statutory Committee 9am  
Audit Committee 10.30am  
Infringements Committee 2pm

Wednesday 11 December  
Statutory Committee 9am

Thursday 12 December  
Statutory Committee 9am

**LOCAL MEETINGS**

*Events listed below are meetings of branches or regions of the Royal Pharmaceutical Society. Details of all future meetings notified to The Journal appear in the Diary section of PJ Online ([www.pjonline.com/noticeboard](http://www.pjonline.com/noticeboard))*

Monday 9 December  
**Bromley** "Update on respiratory disease". Academic Centre, Queen Mary's Hospital, Sidcup. Hot buffet 7.15pm, meeting 8pm.  
**Nottingham** "Managing risk with medicines" by Professor David Cousins (head of safe medication practice, National Patient Safety Agency). School of Pharmacy, Nottingham. Buffet 7.30pm, meeting 8pm.

Tuesday 10 December  
**Moray and Banff** Presentation by Frank Owens (Scottish Pharmaceutical General Council). Laichmoray Hotel, Elgin. 7pm.  
**Southampton** "Complementary therapies" by George Lewith and Richard Middleton. Drug Surveillance Research Unit, Bursledon, Southampton. 7.30 for 8pm.

**Stockport** "Air traffic control and aviation safety management: any lessons for medicine?" by John Rhodes (air traffic control manager, Manchester Airport). Lecture Theatre A, Postgraduate Medical Centre, Stepping Hill Hospital, Stockport. Refreshments 7.15pm, meeting 8pm.

**West Surrey** "Substance misuse" by Dr Paul Van Den Bosch (GP specialist in substance misuse) and Nadine Page (liaison nurse) from Acorn Project, Guildford. Burchatts Farm, Guildford. Buffet. 7.30 to 9.30pm.

Thursday 12 December  
**Glasgow and West of Scotland** Christmas social and wine tasting. "Antipodean anecdotes" by Dr James Steel. Western Infirmary Private Dining Room, Glasgow. 7.30pm. (Ticket-only event.)

**LOCAL MEETING ANNOUNCEMENTS**

Announcements of branch and regional meetings for the Diary column should reach *The Journal* by 1pm on the Tuesday before publication. Branch programme cards are welcome at the beginning of the season, provided that branches subsequently notify *The Journal* in good time about any amendments.