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Royal
Pharmaceutical
Society
of Great Britain

AGM motions seek new committees and information on Save Our Society

Four motions have been submitted for debate at the Royal Pharmaceutical Society's 2005 annual general meeting. Two call for the establishment of a communications committee and a membership committee, a third asks for information about the constitution, funding and objectives of Save Our Society and the fourth seeks the formation of a new group of members to audit the Society's activities (Official Notice, p501).

In the first motion, John Gentle, who has been elected to serve on the new Council, asks for a committee to ensure that all communications are better able to influence events and to improve communications between the Society and the members".

The second motion, by Andrew McCoig, who will also serve on the new Council, calls for a committee "to ensure that the branches, the regions and the wider membership receive the necessary support and resources to meet their needs both now and for the future".

The third motion is by Christine Glover, a current Council member who did not seek

election to the new Council. Mrs Glover is concerned at the dominance of the new Council by pharmacists affiliated to Save Our Society. She wants to know how SOS is constituted, how it is funded and what agenda the SOS Council members intend to pursue.

The fourth motion is from John E. Balmford and Ian M. Caldwell, who were honorary auditors of the Society until the Council decided last year that the demands of modern corporate governance made the role obsolete. Their motion urges the new Council to establish, preferably by election, "a small group of members to consider the activities of the Society and to publish an annual report thereon".

The AGM takes place at 7.30pm on Tuesday 24 May in the assembly hall at the Society's London headquarters. It will be preceded by a ceremony at 6pm for the presentation of fellowship certificates and Charter medals, followed at 7pm by an informal forum at which members will have an opportunity to raise issues they wish to discuss.

This week

■ Motions for AGM

Motions submitted for debate at the Society's annual general meeting on 24 May call for the establishment of two new committees, the setting up of a small group to audit the Society's activities and an examination of the constitution, funding and agenda of Save Our Society (p529).

■ CPD support material upgraded

Support material produced by the Society to help pharmacists and registered pharmacy technicians with their continuing professional development has been upgraded and expanded (p529).

■ "Whistle-blowing" guidance

The Society has published guidance on why, how and where to raise concerns about a health care practitioner's fitness to practise and how to do so without fear of subsequent victimisation (p530).

■ Honorary auditors' last meeting

The honorary auditors of the Society have met to approve the Society's financial statements for the last time before their role is abolished (p531).

Society updates continuing professional development support material

The Royal Pharmaceutical Society has upgraded its CPD Desktop software, prepared 10 continuing professional development case studies and drawn up further competences for all pharmacists and registered pharmacy technicians.

The upgraded CPD Desktop (available on CD-ROM and also online) resolves a printing bug in the current version as well as updating the competences for those working in medicines information. Pharmacists who already have CPD Desktop will be sent the update over the next three weeks (in the meantime they can download it from www.uptodate.org.uk/cpdDesktop or contact the technical helpdesk on 01225 323663).

CPD case studies are available to help pharmacists and pharmacy technicians further understand how they can relate CPD to their field of practice and help with record keeping. The case studies comprise background information about the pharmacist, the CPD submitted and a reviewer's commentary looking at how the pharmacist engaged with the CPD cycle and recorded their CPD.

The case studies focus on key points to consider when recording CPD. They are based on community pharmacy and hospital pharmacy, but case studies for those working in primary care, academia, industry and management will be available shortly. An exemplar case study is also available that looks at a scenario any pharmacist could be faced with.

Copies of the case studies can be downloaded from www.uptodate.org.uk or requested by e-mailing cpd@rpsgb.org or telephoning 020 7572 2540.

Updated competences are available for community pharmacy, hospital pharmacy, primary care, preregistration tutoring, academic, industrial, medicines management, medicines information, supplementary prescribing and government pharmacists. Those using CPD Online or CPD Desktop already have access to the new competences. Those using paper records can download them from www.uptodate.org.uk or request them by telephoning 020 7572 2540.

Fred Ayling, CPD officer, said: "The latest updates to the CPD system are designed to

reflect current practice more accurately. The addition of case studies will also help pharmacists and pharmacy technicians in all areas of practice by highlighting key points to consider when recording CPD. To gain a fuller picture it is advisable to read a number of case studies. As the review focuses on engagement in the process described in the CPD cycle, pharmacists and pharmacy technicians may also learn from reading some of the cases studies relating to other sectors of practice. The exemplar case study is particularly useful because it demonstrates good practice throughout the cycle and how this may be recorded."

The Society says that the competences presented in the CPD system are indicative and only intended as a starting point. Pharmacists and pharmacy technicians are not expected to demonstrate learning against all of the competences that apply to them but to focus on those most in need of development. "Competences are there to help pharmacists and pharmacy technicians identify learning needs and to demonstrate how their learning applies to roles they undertake or intend to undertake."

Society publishes guidance on “whistle-blowing”

New guidance from the Royal Pharmaceutical Society provides advice for pharmacists and pharmacy technicians who may have concerns about a health care practitioner's fitness to practise. “Raising concerns: guidance for pharmacists and registered pharmacy technicians” has been published to help ensure that any concerns about possible dangerous, illegal or unprofessional practices are raised with the appropriate person, and that pharmacists and pharmacy technicians are not unduly inhibited from acting on their concerns.

In an introductory section, the guidance says that any activity that could pose a risk to patient safety or damage the public's trust in the standards of care they receive should be reported to an appropriate person at an early stage so that corrective action can be taken as quickly as possible. It acknowledges this can be difficult, especially if the concern is based on a suspicion rather than hard evidence, and says that legal protection and support are available to help pharmacists and technicians report their concerns with confidence.

In a section on the importance of raising concerns, the guidance points out that the public places great trust in the pharmacy profession, expecting pharmacists and technicians to act in their best interests. The codes of ethics for pharmacists and pharmacy technicians both require that concerns about any health professional's competence, conduct or health should be acted on. Failure to do so could constitute a breach of the code of ethics and form the basis of a complaint of professional misconduct. In addition, it says that pharmacists and technicians must not deter anyone else from raising concerns about them or colleagues and must co-operate fully with any formal inquiry into their own, a colleague's or any other health professional's fitness to practise.

The guidance says that the Public Interest Disclosure Act 1998 provides protection for those who raise genuine concerns about potentially illegal or dangerous practices in the workplace, whether in the public, private or voluntary sector. It protects employees, trainees, agency staff, contractors, home workers and self-employed NHS professionals from dismissal or victimisation and makes it clear that organisations should not deter or

Guidance on raising concerns

The guidance on raising concerns has been prepared by the Society's Practice and Quality Improvement Directorate and was approved by the Council at its April Council meeting (*PJ*, 16 April, p464). It is published as a four-page centre pull-out in this issue of *The Journal*. The document can also be downloaded from the practice guidance section of the Society's website (www.rpsgb.org/practice).

discourage staff from raising concerns. The Act does not require anyone to prove their concerns, provided they are made in good faith.

The Act protects those who report genuine concerns to their employers provided they have reasonable suspicion that malpractice has occurred or is likely to occur. Genuine concerns raised with a regulator or the police will be protected if one has first taken steps to raise the concern with the employer, if one reasonably believes that to do so would lead to victimisation or a cover-up, or if the matter is exceptionally serious.

A section on where to raise concerns says that where possible they should be raised initially with one's employer. For self-employed pharmacists and technicians contracted to provide NHS services, the local primary care organisation or NHS hospital trust is deemed to be the employing authority when raising concerns. Such bodies are required to have clear procedures to help staff raise reasonable concerns about malpractice and to protect against victimisation. Private health care providers should have similar policies in place.

Where it is not appropriate or possible to raise a genuine concern with an employer (eg, if the employer is the source of concern or the employer fails to act on concerns raised), the matter should be reported to a regulatory body or the police. Concerns about a pharmacist or registered pharmacy technician should be referred to the Society without delay if local action is impractical or has failed or if the problem is so severe that the Society's involvement is clearly required.

In a section on how to raise concerns, the guidance says that they can be raised verbally

or in writing, letting the facts speak for themselves rather than making ill-considered allegations. One should keep records of important facts and details of correspondence and ask the investigating body about its procedures for feeding back information about the outcome.

The guidance adds that concerns raised anonymously are difficult to investigate and the person raising the concern may not be protected under the Public Interest Disclosure Act. Anyone unhappy about revealing their identity should consider raising their concerns in confidence, requesting that his or her name is not revealed without consent.

A further section gives guidance for pharmacists and technicians on dealing with concerns that are expressed to them. It says that they have a duty to act on concerns brought to their attention and take steps to ensure that an appropriate investigation takes place. The best course of action depends on the type and severity of the concern. For example, a local scheme could help support a health professional whose performance does not pose a direct risk to public safety but the relevant regulatory body should be contacted if a health professional's conduct or fitness to practise may present a risk to the public.

The guidance also suggests that anyone who is unsure whether to raise a concern should consult an impartial colleague, superintendent pharmacist, chief pharmacist, indemnity insurance provider, defence union, professional association or the Society or Public Concern at Work (an independent body that provides free confidential advice about raising concerns witnessed at work).

Finally, the guidance suggests that, to avoid any delay in taking action, pharmacists, technicians and other staff should make sure they know where to turn if problems come to light. Self-employed pharmacists and technicians providing NHS services are advised to enquire about local NHS policies, while employed or contracted pharmacists and technicians should investigate their employers' procedures. Pharmacy owners, superintendent pharmacists and pharmacist managers should ensure that all staff, including temporary staff and locums, are aware of the importance of raising concerns and are clear how to do so.

Pharmaceutical Press launches a website for its academic journals

Pharmaceutical Press, the Royal Pharmaceutical Society's publications department, has launched a website (www.pharmpress.com/journals) presenting the Society's academic journals on a single platform. It is designed to offer a contemporary, clean presentation with easier, more intuitive navigation for searching through the journals.

Features of the new site include details of editorial board members, a chance to view sample issues online, information for authors

on how to submit articles, advertising guidelines, contents listings and subscription information.

The site covers *Focus on Alternative and Complementary Therapies*, the *International Journal of Pharmacy Practice* and the *Journal of Pharmacy and Pharmacology*. It also has links to *The Pharmaceutical Journal* and *The Hospital Pharmacist* sites on *PJ Online*.

Paul Weller, publisher, Pharmaceutical Press, says: “The creation of our new journals

website offers users a single, coherent, modern web presence for all of our academic journals. The site now provides a wealth of information about individual journals along with seamless links to tables of contents, abstracts and the full text of papers. The site also integrates for the *IJPP* and *JPP* a single link to submit work to these journals online. In future we hope to further develop the site and ultimately provide access to the full archive of journals' contents.”

Honorary auditors meet for the final time to approve the Society's financial statements

The Royal Pharmaceutical Society's elected honorary auditors met for the last time at the Society's London headquarters on 13 April to approve the Society's financial statements for 2004.

The purpose of the meeting, as set out in the Society's Byelaws for many years, is "to inspect the accounts of the Society and the financial statement prepared for them by the Council, which, when approved, must be certified and signed by the auditors present at the audit". The auditors must then present the certified documents to the Council at a meeting before the annual general meeting.

The meeting was the last because the role of the honorary auditors has been brought to an end by a recent amendment to the Byelaws. The Council decided at its meeting in August 2004 that the role had been made obsolete by the demands of modern corporate governance. As from June, the work of the honorary auditors will be the responsibility of the Council and the external auditors.

During the meeting, Society finance staff gave a detailed presentation of the 2004 financial statements and answered questions raised by the honorary auditors.

Also in attendance was Mike Higgs, a partner at the Society's external auditors,



Auditors and Officers: standing (left to right), Brian Wills (auditor), Ian Caldwell (auditor) and John Jolley (Treasurer); seated (left to right), Anthony Cox (auditor), the President and John Balmford (auditor)

Horwath Clark Whitehill, which had recommended that the honorary auditors accept the accounts. The honorary auditors confirmed their acceptance and agreed to approve and sign them.

The accounts will now be formally presented at the AGM. The AGM guidelines on financial statements will be reported in *The Pharmaceutical Journal* before the AGM.

At the end of the meeting, the President, Nicholas Wood, formally thanked the honorary auditors for their commitment and their work over the years. He presented each auditor with a gift of a replica pharmaceutical syrup jar from the Society's museum.

CPD software problem solved

The Royal Pharmaceutical Society's continuing professional development officer, Fred Ayling, says that a small number of users of CPD Online or the CPD Desktop software may experience problems with font size or blurring of text. In most instances it is simply a matter of changing the screen resolution of their computer to 1024x768 pixels or better. Alternatively, it may be that the Macromedia Flash version of CPD Online is not suitable and that the HTML version is preferable.

Help in diagnosing problems and finding appropriate solutions is available from the technical helpdesk (tel 01225 383663; e-mail helpdesk@coacs.com).

Teamwork is key to better care

Improved collaboration between health care professionals to deliver better service and care to patients was the main message from a reception organised by the Royal Pharmaceutical Society's Welsh Executive in Newport on April 19.

Gwent pharmacists joined representatives from the NHS and local health boards at the reception to discuss local health issues and developments with the Welsh Executive.

Addressing the reception, executive chairman Mair Davies said: "Collaboration between health care professionals is key to delivering a better service to the public. By working across boundaries to promote innovation we can help ensure that the trusts and local health boards can deliver a service that the public and NHS want and deserve."

Carwen Wynne Howells, chief pharmaceutical adviser to the Welsh Assembly Government, said: "An event like this helps health professionals to share ideas and work towards the common goal of delivering better care to patients."

Law and ethics bulletin

Instalment dispensing

The Home Office has recently confirmed that the following wording can be used by those prescribing Controlled Drugs by way of instalment in accordance with the Misuse of Drugs Regulations 2001 ("Regulations"), as amended. This text is in addition to the usual Controlled Drug prescription requirements (words and figures, etc). The text reads: "Instalment prescriptions covering more than one day should be collected on the specified day; if this collection is missed the remainder of the instalment (ie, the instalment less the amount prescribed for the day(s) missed) may be supplied."

Use of this wording will enable those supplying Controlled Drugs to issue the remainder of the instalment prescription where a person fails to collect the instalment on the specified day. If a prescription does not reflect such wording, the Regulations only permit the supply to be in accordance with the prescriber's instalment direction. Where a prescriber does not have a handwriting exemption this wording must be handwritten.

In line with this guidance provided by the Home Office, the Society is of the opinion that where this direction is written and is clear and unambiguous, the pharmacist would be in a position to

supply the remainder of the instalment. The pharmacist must, however, use his or her professional judgement in deciding whether making the supply, less the days missed, would be appropriate. The pharmacist must take into consideration the possibility that the patient may have used illegal substances in the interim period and must decide whether it may be appropriate to contact the prescriber to ensure that he or she is content for the supply to be made. Pharmacists must ensure that all prescription endorsements and entries in the CD register correctly reflect the supply made.

OFFICIAL NOTICES

Communications to the Royal Pharmaceutical Society should be addressed, unless otherwise stated, to: The Secretary and Registrar, Royal Pharmaceutical Society of Great Britain, 1 Lambeth High Street, London SE1 7JN (tel 020 7735 9141; fax 020 7735 7629). Official Notices also appear in the Notice-Board section of PJ Online (www.pjonline.com/notices).

Annual general meeting

Notice is hereby given that the 164th annual general meeting of the members of the Royal Pharmaceutical Society will take place in the Assembly Hall, 1 Lambeth High Street, London SE1, on Tuesday 24 May 2005, at 7.30pm.

The following business will be conducted:

1. Presentation of the annual review of the Council for 2004.
2. Presentation of the financial statements for 2004.
3. Report of revisions to the Code of Ethics and Council Statements issued since the 2004 annual general meeting.
4. Adoption of rules of procedure for debate of motions (Byelaws, Section VI, Paragraph 3): "A member may raise any matter or move any motion at any annual general meeting of which he has given the Secretary notice in writing not later than the 20th day of April in the year in which the said meeting is to be held. The Rules of Procedure for debating such motions shall be proposed by the Council and presented for adoption at each annual general meeting at which such a motion is to be moved." The proposed rules will be circulated at the meeting.
5. Consideration of any matters raised or motions moved by members of which notice has been given in writing no later than as stated in the Byelaws:

(i) The following motion will be moved by John Gentle:

"This meeting requests that the RPSGB Council sets up a Communications Committee to ensure that all communications, both within and without the profession, are better able to influence events, and to improve communications between the Society and the members."

(ii) The following motion will be moved by Andrew McCoig:

"This meeting requests the formation of a membership committee to ensure that the branches, the regions and the wider membership receive the necessary support and resources to meet their needs both now and for the future."

(iii) The following motion will be moved by Christine Glover:

"All the non-reserved places for pharmacists on the Council have now been filled by people affiliated to the organisation called Save Our Society (SOS), which originally claimed that its aims were solely connected with the new Royal Charter and now, as the President declared in his resignation statement, all its stated objectives have been achieved. This meeting requires to know how SOS is constituted, how it is funded and what are its aims and objectives. The profession has the right to know what agenda these members of the Council intend to pursue."

(iv) The following motion will be moved by John E. Balmford and Ian M. Caldwell:

"This meeting urges the incoming Council to establish,

preferably by election, a small group of members to consider the activities of the Society and to publish an annual report thereon."

Ann Lewis
Secretary and Registrar

The following programme of events takes place on Tuesday 24 May before the AGM: 5pm, tea and sandwiches available in the hall foyer for those attending the AGM; 6pm, presentation of fellowship certificates for 2004, followed by presentation of the Charter medals for 2005; 7pm, discussion forum, designed to provide an informal opportunity for members to raise issues they wish to discuss.

News item, p529

Erasure from the Register on the direction of the Statutory Committee

The name of the following person was erased from the Register of Pharmaceutical Chemists on 26 April 2005 following the direction of the Statutory Committee at its meeting on 25 January 2005: Sohail Viridi (registration number 3000387), of Manchester.

Ann Lewis
Secretary and Registrar

DIARY

Headquarters meetings

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

Tuesday 3 May

Practice Committee. 9.30am.
Meeting of Officers. 10.30am.
Executive meeting. 1.30pm.

Wednesday 4 May

Reciprocity Committee.
10am.

Local meetings

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

Tuesday 3 May

Barnet "Diabetics and diabetic retinopathy" by Marvyn Elton. Postgraduate Medical Centre, Barnet General Hospital. Food 7.15pm, meeting 8pm.

Cheltenham and Gloucester

"Haematology" by A. Rye, followed by annual general meeting. Cheltenham Postgraduate Centre. Food 7.15pm, meeting 8.15pm.

Thursday 5 May

Crawley, Horsham and Reigate

Chairman's evening; guest speaker Gillian Hawksworth (member of the Royal Pharmaceutical Society's Council). Library, Copthorne Church of England Junior School, Church Road, Copthorne. Refreshments 7.30pm, meeting 8pm.

Wirral Meeting cancelled.

Huddersfield "Presentation by Steven Williams (Pharmaceutical Services Negotiating Committee). Lecture Theatre, Huddersfield Royal Infirmary, Lindley, Huddersfield. Light buffet 7.30pm, meeting 8pm.

Lincoln "New developments in diabetes" by Omar Ali. Branston Hall Hotel. NB. Attendance is by invitation only; requests for invitations should be made to Alistair King at Lincoln Co-op (tel 01522 781173)

Monday 9 May

Stockport "What are the learning needs of pharmacists today?" by Susan Scobie (clinical director of pharmacy, University Hospital of North Staffordshire). Lecture Theatre B, Stepping Hill Hospital, Postgraduate Centre, Pinewood House. Refreshments 7.15pm, meeting 8pm.



Royal Pharmaceutical Society of Great Britain

London headquarters

Switchboard 020 7735 9141; direct dialling, see 'Medicines, ethics and practice'; fax 020 7735 7629; e-mail enquiries@rpsgb.org; website www.rpsgb.org

Scottish Department

Headquarters of the Society in Scotland (including library and information service) 0131 556 4386 (see also 'MEP' guide); fax 0131 558 8850; e-mail info@rpsis.com

Welsh Executive

Headquarters of the Society's Welsh Executive 029 2041 2800; fax 029 2041 2810; e-mail wales@rpsgb.org

Information centre

Book loans and information Library (loans, photocopies) 020 7572 2300; e-mail library@rpsgb.org Technical information, 020 7572 2302; fax 020 7572 2499; e-mail techinfo@rpsgb.org

Pharmacists' advisory service

Information on legal and ethical matters relating to pharmacy practice, 020 7572 2308; fax 020 7572 2510, e-mail ftp@rpsgb.org

Pharmaceutics information

Information, advice and problem-solving 020 7572 2302; fax 020 7572 2499; e-mail pharm.div.rpsgb@dial.pipex.com

Benevolent fund

Financial help for pharmacists and their dependants and information about convalescence 01926 315994 or 01323 890135

Pharmacists' health support programme

Confidential help and support for pharmacists who experience problems with alcohol and other drugs of addiction 01926 315138

Listening friends scheme

Free confidential helpline for pharmacists under stress 020 7572 2442

Pharmaceutical press

Purchase of books and subscriptions to journals 01491 829272; fax 01491 829292; e-mail rpsgb@cabi.org; website www.pharmpress.com