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Royal
Pharmaceutical
Society
of Great Britain

Society consults branches on response to Section 60 Order

Publication of the draft Pharmacists and Pharmacy Technicians Order under Section 60 of the Health Act 1999 is allowing the Royal Pharmaceutical Society to consult widely on the Department of Health consultation on the proposed new legislation. Special meetings are being held in a number of the Society's branches at which Council members and senior members of staff can determine the views of members locally on the draft Order (see Diary, p490).

Although the Council has been aware of many aspects of the proposed legislation, it has until now been able to discuss the issues only in confidential session.

At the **April Council meeting**, in public session, the President, Hemant Patel, welcomed the fact that the draft Order had finally been published. He said that Council members and Society staff had worked hard to influence the shape of the document. Since 2002 the Council had scrutinised all areas of regulatory machinery and produced hundreds of decisions on how they should be reformed. All these decisions had been passed

to the Department of Health to inform the drafting of the legislation.

The Society had been in liaison with the Department ever since to explain the Society's existing functions and governance framework and to ensure maximum possible reflection of the Council's decisions in the draft Order. Although it hoped for some changes, the Society's efforts had borne important fruit.

More recently, a working group had been helping to inform response to the consultation, issuing materials through *The Pharmaceutical Journal* and the Society's website.

The President thanked everyone who had helped the Society reach this stage. In particular, he thanked the small dedicated team that had put in a tremendous effort over a long period and those Council members who had had an input into the process.

The Secretary and Registrar, Ann Lewis, said that the Society looked forward to the draft Order's speedy progression into law once the 12-week consultation ended on 19 June.

This week

■ Section 60 Order

Members of the Society are being given the opportunity to discuss the draft Pharmacy and Pharmacy Technicians Order under Section 60 of the Health Act 1999 with Council members and senior staff of the Society at special meetings of Society branches (p485).

■ Museum acquisitions policy

An updated acquisition and disposal policy for the Society's museum restores its former comprehensive collecting remit following a four-year period in which collecting has been restricted to proprietary medicines, materia medica and items from the Society's history (p486).

April Council meeting

Reports on this and the following page conclude our coverage of the meeting of the Council of the Royal Pharmaceutical Society on 4 and 5 April (*PJ*, 15 April, p453–54). These reports will be supplemented in due course by a verbatim transcript of the meeting's public sessions published on the Society's website. Already available through the website are relevant agendas, supporting papers and minutes.

Principles agreed for accreditation of support staff training courses

The Council has approved a set of principles for the accreditation of pharmacy support staff training programmes that meet the Society's policy requirements.

At the **April Council meeting**, it was agreed that the Society, using these principles, should accredit all courses other than those that

are accredited by national education regulatory bodies.

Accreditation would centre on a visit from a team drawn from the Society's accreditation panel, the membership of which would be adjusted as necessary to ensure a sufficient pool of experts in support staff curriculum and

process. The full cost of the accreditation process, including central costs, would be recovered from the training providers.

It was agreed that the process should be operational by the end of 2006 and would be reviewed at the end of the first accreditation cycle.

Revised protocol for registration of technicians

The Council of the Royal Pharmaceutical Society, at the **April Council meeting**, approved a revised protocol for the voluntary register of pharmacy technicians.

The revised protocol is intended to be more robust than its predecessor, particularly in regard to the registration of those with overseas qualifications and those with qualifications gained in the EU. The revision is expected to reduce significantly the risk of appeals against registration decisions and the risk of legal challenge.

The new protocol does not affect technicians whose applications to join the register were made before the Council meeting and it will remain in force only until mandatory registration comes into effect with the enforcement of the Pharmacists and Pharmacy Technicians Order under Section 60 of the Health Act 1999.

Lawful for technician to serve on Welsh board

Legal advisers have confirmed that it is lawful under the Royal Pharmaceutical Society's Charter for the new Welsh Pharmacy Board to include a pharmacy technician with full voting rights, elected by and from pharmacy technicians in Wales.

At the **April Council meeting**, the Secretary and Registrar said that the office had taken legal advice following a request by the Council at its February meeting. The advice was that the Charter, in allowing the Council to establish boards and other structures to advance professional leadership or support the development and regulation of the profession, did not limit the context of "the profession" to mean only pharmacists, nor did it restrict board membership in any way. It was not relevant that pharmacy technicians are not members of the Society and it was lawful for Wales to adopt the structure it had chosen.

Broad remit for museum acquisitions is restored

An updated acquisitions and disposals policy for the museum of the Royal Pharmaceutical Society restores its former comprehensive collecting remit following a four-year period in which collecting has been restricted to proprietary medicines, materia medica and items from the Society's history.

The revised policy was approved at the **April Council meeting** on the recommendation of the Science Committee. As well as reinstating a comprehensive collecting remit, the policy update aims to reflect the museum's current practice and retain compliance with current and forthcoming national standards. Among other things, it takes into account the features of a model acquisitions and disposals policy required by the Museums, Libraries and Archives Council's accreditation standard, with which the museum will need to comply from 2008 if it is to meet a new accreditation standard that will replace its current registration.

The museum will continue to maintain its main focus in areas where it is deemed to be the only British museum currently holding and regularly updating a systematic connection. These areas are:

- Contemporary, recent and historical proprietary and other medicines, including related promotional or other material of particular medical, social or political historical significance
- Controlled Drugs, fulfilling all requirements necessary to the continuing renewal of its licence to be in possession and authority to be in possession, granted under the Misuse of Drugs Act 1971 and Misuse of Drugs Regulations 1985 (as amended)
- Material evidence relating to the history and work of the Society

In addition, the museum will resume the collection of a full range of material evidence including artefacts, images, historical and contemporary artworks, and associated information relating to the history and practice of pharmacy in Britain (in its broadest social, political, medical, scientific and international context) and the development of the profession of pharmacy in Britain.

Acquisition will focus particularly on areas that are currently under-represented in the collection, for example, material dating before 1800 and after 1945, with special reference to contemporary objects.

In the case of medicinal or cosmetic preparations, the museum will collect two examples of each item where possible, to allow the

potential for destructive testing in the future, to facilitate possible future research while taking into account all ethical implications.

As well as reintroducing collection in all areas of pharmacy history, the updated policy includes a specific statement that the museum will formally decline offers of objects with a specific regional provenance, advising donors to offer the item to the most relevant local museum in preference to taking them out of their geographical or community context.

Other features of the updated policy include updated references to legislation governing illicit trade, items that might be designated as treasure. Also incorporated into the policy is new Government guidance on retention of human remains in museums and a Museum and Galleries Commission statement of principle on "Spoliation of works of art during the Nazi, Holocaust and World War II period".

Opening debate on the recommendation at the Council meeting, the President thanked the keeper of the museum collection, Briony Hudson, along with her team and the museum volunteers, for the quality of the museum displays within the headquarters building.

Stephen Denyer, chairman of the Science Committee, said that it was a privilege to be involved not just with what is going forward in the advance of the profession, but with the bedrock on which that science was being built. It was particularly pleasing to present the proposed new policy from a position of anticipated measured growth in the museum after a period of consolidation.

Answering a question from Douglas Simpson, Ms Hudson confirmed that there was no intention to redistribute items already in the collection to regional museums. But if the museum were offered items with local provenance rather than national significance, then a local registered museum — one with the same standards of care as the Society's museum — should be given first refusal. The community and local context was important, particularly with material from a business or hospital that had been in a town for a long period. The museums network meant that such an item would not be lost to the Society. It could borrow items or advise an inquirer where to go to research an item.

Sylvia Hikins said she felt privileged to walk through the building and see the museum displays but she would love to see the museum reach outside to the public more, promoting pharmacy and science, particularly among young people.

Ms Hudson said that the museum's terms of remit were as an education and outreach resource. Among other things, it lent objects for exhibitions in other museums so that they reached a wider audience. It regularly worked with its neighbour, the Museum of Gardening History, answering inquiries about medicinal plants and supporting it when it tried to add a medicinal or pharmaceutical element to its work. The museum was also working on medicinal plants with the Museum of Garden History and four other museums of medical history as part of Museums and Galleries Month, which is in May.

In terms of a schools audience, the museum hoped that the new displays in the reception area would attract small groups, although it would have to be by appointment. The museum had been working with local schools and hoped to build on its contacts and accommodate further visits. In the longer term, the museum would like to make more material available for use at a distance, through material on websites and through the development of published teachers' packs.

Ms Hudson added that the Society had recently received a request from Goldsmiths Hall, which this summer was to have an exhibition on two goldsmiths, one of whom was the designer of the President's chain. The President had agreed to lend the chain for the exhibition.

Ray Jobling said that the museum was a tremendous asset to the Society. He wished to emphasise that the areas currently under-represented included materials from 1945 onwards. That was now more than 60 years ago and, with the NHS dating from 1948, it was a time of significant change. The policy of collecting recent items was a sound one.

Andrew McCoig said that he was concerned that the policy might discourage gifts or bequests from pharmacists who had something to leave that might be of historical interest.

Ms Hudson said that there was a delicate balance. Every object collected by the museum had resource implications. Once it had said "yes" to an object, the museum's role was to keep it forever, to add it to a resource that the Society would keep in trust for the public and members for the rest of time. Therefore, before accepting an object, the museum had to be sure that it could store it safely and preserve it. And it was also clearly not a good use of the museum's resources to have multiple examples of the same item.

Standing orders approved for the conduct of meetings of the future national boards

The Council of the Royal Pharmaceutical Society has approved standing orders for the conduct of meetings of the Scottish and Welsh Executives and the future national pharmacy boards.

The decisions was made at the **April Council meeting** on the recommendation of the Council's Governance Committee.

Presenting the recommendations to the Council, John Hanlon, chairman of the Governance Committee, said that the proposal had been discussed by the Scottish and Welsh Executives, which had made some helpful comments that had been incorporated in the draft standard orders.

Society hopes for increased participation in Council election this year

The Royal Pharmaceutical Society is encouraging members to take part in this year's Council election and hopes to see an upturn in the proportion of voting papers returned.

The proportion of members voting has declined slowly over many years. Last year the percentage was 21.8, compared with 22.8 in 2004 and 22.4 in 2003.

However, the Society believes that the complex nature of last year's multiconstituency election may have deterred some pharmacists from voting. The election was an unusually complicated one because it was the first election to the new, enlarged Council. It

involved a total of 30 candidates seeking election to the 14 unreserved places for pharmacists and/or to one of the three national seats for England (with the Isle of Man and the Channel Islands), Scotland and Wales.

The Society hopes that this year's single constituency ballot — involving the selection of up to five names from a list of only eight candidates — will attract more voters.

An Official Notice reminding pharmacists about the election appears on p489.

After the original voting papers posted on 31 March were declared invalid because of an administrative error, new papers were sent

out to members on 7 April by first class post (or the equivalent for overseas addresses) to ensure that they reached members in good time. (The Society's regulations require voting papers to be sent out at least 14 days before the election's closing date.). Completed ballot papers must reach Electoral Reform Services, which manages the election on behalf of the Society, by noon on 5 May.

Members who have already voted using the original grey voting paper will need to vote again because those votes will not be counted. The new ballot papers are printed on salmon-coloured paper.

Library seeks feedback on book loan service

The Royal Pharmaceutical Society's London library is seeking feedback from members about its services.

According to the latest issue of *Information Centre Bulletin*, which provides monthly news from the library, the technical information service and the museum, the library is soon to introduce a simple feedback form for monitoring the value of its book collection. Based on a method used by public libraries, it will attach a brief questionnaire to each book at the point of issue. Completed questionnaires will help the library to determine whether a book adds value to the collection (either for research or general interest), whether it should buy new editions and whether it should buy other books on the same subject.

As well as encouraging members to find the time to complete the questionnaire when they borrow books, the library also wants to hear from members who do not often make use of the loan service, perhaps

because the library does not hold relevant titles or the loan system does not meet their needs. The library will soon be offering simple methods by which members can recommend book titles, but in the meantime members can contact the library by telephone (020 7572 2300), fax (020 7572 2499), e-mail (library@rpsgb.org) or letter.

Members of the Society may borrow up to five items at a time from the library. Loans may be requested by telephone, fax, letter or e-mail. Most items are loaned for an initial period of 28 days, which may be renewed twice if no other user has requested the item.

There is no charge for the lending service. The library pays postal costs for sending items anywhere in the UK. The only cost to the member is the return postage plus any fines charged for late returns.

Further information about book loans is available through the Society's website (www.rpsgb.org), as is *Information Centre Bulletin*.

21,000 pay fees online

Some 21,000 pharmacists chose to pay their Royal Pharmaceutical Society retention fees online and on time for 2006, the Society has announced. A significant number used online payment for the first time.

Andrew Gardner, head of registration, said that as well as adopting the more efficient payment method, 35,000 pharmacists paid before the 20 January deadline and 45,000 before the removal date, leaving only 584 to be removed from the Register for non-payment, compared with about 870 in 2005.

Mr Gardner said: "The Society will continue to work on improving the fee collection process to make sure it is as efficient and low cost as possible, and we hope members will continue to embrace innovations as they are rolled out."

The 2006 retention fee collection period ended on 4 April, when the Council removed from the register those members who had not paid. The 2007 fee is due on 1 January 2007 with fee forms being posted in early December.

Society membership groups

The Royal Pharmaceutical Society has established special interest groups for community pharmacists, for veterinary pharmacists, for industrial, regulatory and technical pharmacists, for hospital pharmacists and for pharmacy academic staff. The groups hold meetings to consider topics of interest within their own fields of practice and they provide a source of advice to the Society's Council on specialist matters. Details of the groups can be obtained from the Society. Contact details are given below.

Community Pharmacists Group The Community Pharmacists Group, formed at the beginning of 1994, is open to all pharmacists engaged in the practice of community pharmacy. The group committee has the discretion to grant membership to pharmacists who are not engaged in community pharmacy practice but who have a direct involvement or demonstrable interest in that aspect of pharmacy. Contact: Angela Canning, practice division (tel 020 7572 2412; e-mail angela.canning@rpsgb.org).

Veterinary Pharmacists Group The Veterinary Pharmacists Group is open to all pharmacists who are engaged in, or actively considering engaging in, the preparation or supply of agricultural chemicals, veterinary medicines and allied products. Other pharmacists may be granted membership at the discretion of the group committee. Contact: Lorraine Fearon, practice division (tel 020 7572 2409; e-mail lorraine.fearon@rpsgb.org).

Industrial Pharmacists Group The Industrial Pharmacists Group is for pharmacists who are engaged in industrial practice, those who act as consultants to industry, those whose work is concerned substantially with questions of industrial pharmaceutical practice and those whose work concerns, or who have an interest in, industrial, regulatory or technical matters affecting pharmacy. Contact: Angela Canning, practice division (tel 020 7572 2412; e-mail angela.canning@rpsgb.org).

Hospital Pharmacists Group The Hospital Pharmacists Group is for pharmacists who work in NHS, private or armed forces hospitals and those employed by, or acting as consultants to, NHS health authorities, health boards and trusts. Also eligible are pharmacists working in the prison service, community pharmacists seconded to provide a service within a private hospital and other pharmacists whose work is significantly concerned with matters relating to the practice of hospital pharmacy. Contact: Lorraine Fearon, practice division (tel 020 7572 2409; e-mail lorraine.fearon@rpsgb.org).

Academic Pharmacy Group The Academic Pharmacy Group is open to pharmacists and other academic staff who make a significant contribution to pharmacy teaching and research in a UK school of pharmacy or a recognised pharmacy academic practice unit. Contact: Damian Day, education and registration directorate (tel 020 7572 2215; e-mail damian.day@rpsgb.org).

Reprimand for superintendent who lives abroad

A pharmacist who lives in Jordan has been reprimanded by the Statutory Committee for failing in her duties as the superintendent pharmacist of a Brighton pharmacy company. The reprimand was conditional on her giving a written undertaking to resign as superintendent and not take up any post as a superintendent while continuing to live abroad. The committee also reprimanded the company.

On 24 November 2005 and 20 February, the committee inquired into the case of Maysa Jibreel Al-Natsheh (registration number 90768), of Amman, Jordan, and Preston Park Chemists Ltd, a retail pharmacy company that owns two pharmacies in Brighton. The inquiry had arisen from a complaint by the Council of the Royal Pharmaceutical Society alleging that misconduct such as to render Mrs Al-Natsheh unfit to have her name on the Register and to render the company liable to disqualification may have been demonstrated by her failure to discharge her personal professional responsibilities as a superintendent pharmacist. In particular, the Council alleged that Mrs Al-Natsheh had:

- Failed to ensure that a pharmacist recruited by the company had the requisite knowledge, skills and fitness to perform work delegated to him
- Failed to ensure that he was sufficiently competent in English
- Failed to ensure that he was properly informed of the professional activities he was expected to undertake
- Failed to ensure that he was provided with adequate support staff and information about the pharmacy to enable him to perform his duties effectively
- Failed to supervise or support him
- Failed to exercise proper control over the business, in that the pharmacist was not aware of the means by which he could contact her other than on her occasional visits to the pharmacy

The committee heard that the major shareholder in the company was a former pharmacist, Errol Ganpatsingh. He had previously owned the pharmacies in his own name and had set up the company to run them after he was struck from the Register in 2002. Mrs Al-Natsheh was appointed superintendent pharmacist on 8 July 2002 but left the UK for Jordan in July or August 2002.

On 24 August 2002 the company advertised for a pharmacist, stating that training would be provided. Mr Ganpatsingh interviewed and subsequently appointed an Iranian man who had qualified as a pharmacist in Italy and whose English was so poor that he had asked a friend to seek the interview and then attend it with him as an interpreter. During the interview the pharmacist expressed concern that he had no experience of community pharmacy in England and only limited experience of community pharmacy in Italy, but Mr

Ganpatsingh told him that he would receive full training and support both in pharmacy matters and in improving his English.

The pharmacist began work on 1 October 2002 in charge of one of the company's pharmacies, with staff who in the main had little pharmacy experience and poor English language skills. He was not provided with a structured induction programme and was not shown any standard operating procedures. He was not shown how to use the pharmacy computer, despite having requested training, and he only learnt how to use it when, on his own initiative during his time off, he visited the company's other pharmacy.

The committee was told that Mr Ganpatsingh did not tell the pharmacist about the role of the superintendent pharmacist and did not give him Mrs Al-Natsheh's name or contact details. The pharmacist did not speak to or meet Mrs Al-Natsheh until about four weeks after he had started work, when she visited the pharmacy for about an hour and spoke to him for about 15 minutes. He requested help to improve his English and asked if he could meet her on a monthly basis, but she took no action in respect of either request. His only other contact with her before he resigned on 15 February 2003 was a telephone call during which she told him that she was too busy to speak to him and that he should put his concerns in writing.

One of the Society's inspectors told the committee that, in an interview in January 2004, Mrs Al-Natsheh had stated that her main residence was in Jordan and that she travelled to England about every two to three months.

Mrs Al-Natsheh told the inspector that she was responsible for recruiting staff. If she was not available she would assign this to another responsible member of staff. Mr Ganpatsingh had recruited the Iranian pharmacist, but she considered that she would also have recruited him had she interviewed him herself, despite her concerns about language competence.

Mrs Al-Natsheh admitted that the pharmacy had no induction training programme for new staff and that the new pharmacist was given no opportunity to work alongside any other pharmacist because he had "obviously been through all the legal and ethical requirements to be on the Register".

Mrs Al-Natsheh also admitted that when she first met the pharmacist, four weeks after he started work, she had some concerns about his competence but allowed him to remain in charge of the pharmacy without ensuring that he undertook appropriate additional training.

Giving the committee's determination on 22 March, the chairman, Lord Fraser of Carmyllie, QC, said that the chronological and logical point from which to start was the committee's decision to direct the removal of Mr Ganpatsingh from the Register. "He then followed the well-known course of converting his business into a limited company to circumvent the effects of that censure by us."

By law, the company was required to employ a superintendent pharmacist. Mrs Al-Natsheh was appointed, and remains, superintendent pharmacist. She had been living with her family in Brighton, but her husband secured a long-term contract in Jordan, which necessitated a family move to Amman.

The chairman said that there was no statutory requirement for a superintendent pharmacist to live in the UK. Nor did the Society require UK residence, notwithstanding the duties, clearly set out in 'Medicines, ethics and practice: a guide for pharmacists', that it imposed on a superintendent pharmacist.

The Iranian man appointed by Mr Ganpatsingh had qualified as a pharmacist in Italy in 1995 and had worked in industry there. He had moved to the UK in October 2001 and registered with the Society in August 2002. His only previous experience in community pharmacy was a six-month period during his training in Italy.

The chairman added that when appearing before the committee in November 2005 the Iranian pharmacist was only comfortable with an interpreter present, although he did answer some questions himself and clearly understood others. If that was the situation then, his English at the recruitment interview in 2002 must have been no better and probably worse.

The chairman went on: "There is a duty on a superintendent pharmacist to ensure that an applicant for the job, or someone employed by that pharmacy, has the requisite knowledge, skills and fitness to perform the work delegated to them and, as I have repeated, to ensure that that applicant or person employed was sufficiently competent in English.

"Our conclusion has to be . . . that Mrs Al-Natsheh fell far short of her responsibilities as a superintendent pharmacist and her misconduct is such as to render her unfit to have to her name on the Register of Pharmaceutical Chemists. Instead of directing the removal of her name from the Register, we will require from her a written undertaking to this committee to resign as superintendent pharmacist. We understood from her evidence, or from what was said before us, that she has that in mind anyway. We would also want a further provision in her undertaking to be that she will not undertake any post as superintendent pharmacist while she continues to live abroad. If she is prepared to give such undertakings, we will restrict our sanction to a reprimand. . . .

"So far as the company is concerned, we will restrict our censure in respect of the company to that of a reprimand as well."

The chairman added that there was nothing reprehensible about Mrs Al-Natsheh's conduct other than the fact that she lived outside the UK and not even within the same time zone, which meant there would be significant periods of the day when the pharmacy would be open but she would not be available. That was unacceptable way for a superintendent pharmacist to carry on business.

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).

Statutory Committee inquiries

The Statutory Committee will meet at the Royal Pharmaceutical Society of Great Britain, 1 Lambeth High Street, London SE1, at 9.30am on Monday 24 April, Tuesday 25 April, Wednesday 26 April and Thursday 27 April 2006 to hear the following inquiries:

Monday 24 April 2006

1. The committee will resume the inquiry into a complaint by the Council of the Society against **Mustafa Hajimuddin Bhajji** (registration number 1050805) which alleges that the supply of methadone contrary to Regulation 16(4) of the Misuse of Drugs Regulations 2001 and the failure to make an entry in the Controlled Drugs register in respect of the supply of methadone (in breach of Regulations 19(1) and 20(b) of the Misuse of Drugs Regulations 2001), may amount to misconduct.
2. An inquiry into a complaint by the Council of the Society against **Sarju Patel** (registration number 1072103) which alleges that the unauthorised use of commercially sensitive information regarding another pharmacy contrary to Key Responsibility 3 of the Code of Ethics and Standards may amount to misconduct.

Tuesday 25 April 2006

3. An inquiry into a complaint by the Council of the Society against **Mark Derek Robinson** (registration number 75404) which alleges that a dispensing error involving the supply of 50ml of methadone mixture 1mg/1ml labelled as 50ml Oramorph 10mg/5ml against a prescription calling for 25ml of Oramorph 10mg/5ml; a second dispensing error involving the supply of 50ml of Oramorph 10mg/5ml against the above-mentioned prescription; the failure to contact the prescriber and/or advise the patient's parents to contact the prescriber and/or give the patient's parents appropriate advice following the discovery of these errors; the return of the

wrongly dispensed methadone to a methadone stock bottle in the knowledge that a dose of the dispensed methadone had been consumed; and the failure to record in the Controlled Drugs register the supply of 50ml methadone mixture 1mg/1ml, may amount to misconduct.

4. The committee will consider an application for restoration to the Register on behalf of **Michael John Wallace Haynes**. Mr Haynes was removed from the Register in September 2000 following a direction of the committee.

Wednesday 26 April 2006

5. The committee will deliver the determination of the inquiry into a complaint by the Council of the Society against **Michael Turner** (previous registration number 67819) which alleged that the unlawful possession of Controlled Drugs; the possession of quantities of prescription-only medicines at his home; a failure to make entries in the Controlled Drugs register in respect of methadone and amphetamine purchases and supplies; the unlawful supplies of methadone and/or diazepam; and providing false information to police officers, may have amounted to misconduct. The committee also considered convictions for various driving offences; two counts of the supply of class A Controlled Drugs contrary to Section 4(1) of the Misuse of Drugs Act 1971; three counts of the supply of Class C Controlled Drugs contrary to Section 4(1) of the Misuse of Drugs Act 1971; and one count of possession of a Class B Controlled Drug contrary to Section 5 (3) of the Misuse of Drugs Act 1971.
6. An inquiry into a complaint by the Council of the Society against **Richard Gregory Woodroffe** (registration number 68919), **Margaret Mary Rita Gorman** (registration number 67793) and **Alan Woodcock Ltd** (identification number 1001329), which alleges that a dispensing error involving the supply of 100 Celance 1mg tablets against a prescription for 200 pergolide 50µg tablets, may amount to misconduct.

Thursday 27 April 2006

7. The committee will deliver the determination of the inquiry into a complaint by the Council of the Society against **Derek Michael Phillips** (registration number 75766) which alleged that discrepancies in Viagra 50mg and 100mg stock; breaches of

Regulation 19 of the Misuse of Drugs Regulations; breaches of the Misuse of Drugs (Safe Custody) Regulations; a failure to deal appropriately with Controlled Drugs (failure to segregate patient returns and date-expired stock); the supply of sildenafil without a valid prescription; breaches of Regulation 6 of the Medicines (Sale or Supply) (Miscellaneous Provisions) Regulations 1980; and the condition of the pharmacy notwithstanding a warning from the Society inspector, may have amounted to misconduct.

8. An inquiry into the case of **Catherine Anne Shennan** (registration number 73563), who has been convicted of driving a motor vehicle after consuming so much alcohol that the proportion of it exceeded the prescribed limit, contrary to Section 5(1)(a) of the Road Traffic Act 1988 and Schedule 2 of the Road Traffic Offenders Act 1988.

David Gomez Secretary to the Statutory Committee

Council voting papers

Reissued voting papers for the 2006 Council election were posted to members of the Royal Pharmaceutical Society on 7 April 2006. After completion, the papers should be returned to Electoral Reform Services Ltd, PO Box 6352, London N1 1YR, to arrive not later than noon on Friday 5 May 2006.

Members are asked to post their voting papers as early as possible.

Any member who does not receive voting papers should contact the Society's head of central administration, Averil Ridgway (tel 020 7572 2204; e-mail averil.ridgway@rpsgb.org), so that a further set can be sent.

DEATHS

Evans On 29 March, Richard Michael Evans, MRPharmS, aged 46, of 206 Queensferry Road, Cary, North Carolina, US. Dr Evans registered in 1986 (see Tribute below).

Makin On 3 February, James Sager Makin, aged 88, of 76 Redhouse Road, Tettenhall, Wolverhampton. Mr Makin registered in 1939 and retired from the Register in 1986.

TRIBUTES

Evans In a tribute to the late Richard Michael Evans (see Column 3), GLYN TAYLOR, senior lecturer, Welsh School of Pharmacy, and STEPHEN FARR, chief scientific officer, Aradigm Corporation, write: It was with great sadness that we heard of the sudden death of Richard Evans while on a business trip in Spain. Richard studied at the Welsh School of Pharmacy, graduating with a BPharm in 1985. After registering in 1986, he returned to the school to study for a PhD in inhalation pharmaceuticals under the supervision of one of us (Stephen Farr).

After graduating with a PhD in 2000, Richard moved to work in the US, initially for Delphi/Armstrong Pharmaceuticals, then Rhône-Poulenc Rorer and latterly as vice-president, pharmaceutical development, for Inspire Pharmaceuticals. He joined Inspire soon after the company's inception and was an integral member of the management team that grew Inspire into a publicly traded specialty pharmaceutical company focused on therapeutics for ocular and respiratory diseases.

During his career, Richard showed great commitment and dedication to research in pharmaceutical science and published a number of important scientific articles and patents in this area.

His most recent accomplishment was in helping steer a promising new inhaled drug for the treatment of cystic fibrosis through to late stage clinical development.

It is tragic that he was taken from us at the height of his career. Richard was always the "gentle giant" who inspired vision and encouraged the heart of everyone who worked around him. He was a great ambassador for the school and a passionate advocate for all things Welsh. He was a longstanding technophile and we always marvelled at what new device he would pull from his bag during his frequent visits.

He was a keen biker and many of his friends will have fond memories of him astride a motorcycle, his long beard windswept in the breeze.

He will be sadly missed by professional colleagues and friends across the world. Our thoughts are with his wife Carole and parents Don and Alma.

Colin William Challinor

We are pleased to announce that Colin William Challinor, for whom a death notice appeared last week (p464), is in fact alive and well. The notice was based on incorrect information supplied to *The Journal* by the Royal Pharmaceutical Society, which has apologised to Mr Challinor.

DIARY

Headquarters meetings

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

Monday 24 April

Statutory Committee. 9.30am.

Tuesday 25 April

Statutory Committee. 9.30am.

Wednesday 26 April

Statutory Committee. 9.30am.

Thursday 27 April

Statutory Committee. 9.30am.

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)

Monday 24 April

Bury and Rochdale "Nutritional support" by Christine Bates (chief dietitian, North Manchester General Hospital). Village Hotel, Waterfold Business Park, Rochdale Road, Bury. Junction 2 off M66. 7.30 for 8pm.

Stockport "Child protection and implications of the Bichard report: how do they impact on your obligations as pharmacists and confidentiality with young patients/customers?" Regent House, Heaton Lane, Stockport. Refreshments 7.15pm, meeting 8pm.

Tuesday 25 April

Ayrshire Annual general meeting. Gailes Lodge, Irvine. 7.30pm.

Croydon "New contract: one year later" by Naina Chorai.

Postgraduate Medical Centre, Mayday Hospital. Buffet. 8pm.

Hertford "Asthma and asthma devices" by Richard Marshall (director, discovery medicine, GlaxoSmithKline) and Caroline Timbury (specialist respiratory nurse). Schering Plough, Welwyn Garden City. Refreshments 7.30pm, meeting 8pm.

Harrow and Hillingdon Annual general meeting followed by "Medicines use reviews in practice" by Angela Alexander. Cumberland Hotel, Central Harrow. Buffet 7.30pm, meeting 8pm.

Hull "Draft Section 60 Order for pharmacists and technicians" by Dorothy Drury (member of Royal Pharmaceutical Society's Council). Basil Reckitt Conference Centre, Dansom Lane, Hull. Refreshments 6.30pm, meeting 7.30pm.

South Cheshire "New ways of working: opportunities for pharmacists in the new white paper" by Nia Evans. Fourways Inn, Delamere (A556). Meal 7.30pm, meeting 8pm.

Wednesday 26 April

Edinburgh and Lothians Special meeting: "Section 60 Order" by Ann Lewis (Secretary and Registrar, Royal Pharmaceutical Society) and Lyndon Braddick (director of the Society's Scottish Department). 36 York Place, Edinburgh. 8pm.

Isle of Man "Better medicines for children" by Tony Nunn (director of pharmacy, Alder Hey Children's Hospital). Keyll Darree (Department of Health and Social Security education and training centre), Noble's Hospital, Braddan. Buffet 7.15pm, meeting 8pm.

Leeds "Pharmacy practice research topic: long term illness" by Jon Silcock and Duncan Petty (University of Leeds). Leeds Business Centre, Clarendon Road, Leeds. 7 for 7.30pm.

Lincoln "The history of the treatment of depression" by Helen Humbles (Wyeth clinical liaison support service). Postgraduate Medical Centre, Lincoln County Hospital. Meeting 7.30pm, supper 8pm.

Sunderland "The pharmacological management of chronic obstructive pulmonary disease" by Andrew Husband (senior lecturer, School of Pharmacy, University of Sunderland). Sunderland Marriott Hotel, Seaburn, Sunderland. Food 7pm, meeting 7.30pm.

Wigan "Dermatology". Brocket Hotel, Wigan. Buffet 7pm, meeting 7.30pm.

Teesside "Every child matters" by Gloria Pearson (north east co-ordinator, National Healthy School Programme), followed by annual general meeting. Marton Pharmacy, Marton Estates Square, Stokesley Road, Marton, Middlesbrough. Buffet. 7.30pm. (Note change of venue.)

Wirral "Asthma" by Robert Angus (consultant chest physician, University Hospital, Aintree). Postgraduate Education Centre, Clatterbridge Hospital. Buffet 7.30pm, meeting 8pm.

Thursday 27 April

Birmingham "HIV". Birmingham Medical Institute, 36 Harborne Road, Birmingham. 7.30pm.

Buckinghamshire Annual general meeting followed by "Rising resistance" by Ruth Uden (antibiotic pharmacist, Buckinghamshire Hospital Trust).

Veterinary diploma

The Royal Pharmaceutical Society offers a diploma in veterinary pharmacy and a postgraduate certificate in companion animal health care.

The core programme for the diploma consists of four modules, each of which includes a written assignment. Those aiming for the diploma must complete all four modules, undertake recorded practical experience, submit a dissertation, sit an oral examination and complete two consecutive three-day residential periods at Harper Adams University College, near Newport, Shropshire, where a full range of livestock units is available for study. The full diploma course can be taken in one year or spread over up to four years.

The postgraduate certificate is obtained by completing two modules through distance learning and attending a study day at Harper Adams.

Further information and registration forms can be obtained from Lorraine Fearon, Royal Pharmaceutical Society, 1 Lambeth High Street, London SE1 7JN (tel 020 7572 2409; e-mail lorraine.fearon@rpsgb.org).

BMI Chiltern Hospital, Great Missenden. Buffet 7.30pm, meeting 8pm.

Halifax "The management of type 2 diabetes" by Vijay Bangar (consultant diabetologist, Calderdale Royal Hospital). Learning and Development Centre, Calderdale Royal Hospital, Halifax. Buffet 7.30pm, meeting 8pm.

Leicestershire Special meeting to discuss the Section 60 Order and formulate a response to the

Society, led by Christine Gray (head of corporate governance, Royal Pharmaceutical Society). Trinity Methodist Church, Harborough Road, Oadby. 7.30 for 7.45pm. (For directions contact Ian Bell (tel 0116 2715057; e-mail ianbell130@btinternet.com).

Thames Valley "Continuing professional development online". Kingston University. 7.30 for 8pm. Numbers limited: contact Mary Landers (chickenmaryland@aol.com).



Royal Pharmaceutical Society of Great Britain

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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 in pharmaceutics 020 7572 2302; fax 020 7572 2499; e-mail pharmaceutics@rpsgb.org

Benevolent fund

Financial help for pharmacists and their dependants and information about convalescence 01327 264739 or 01323 890135

Pharmacists' health support programme

Confidential help and support for pharmacists who experience problems with alcohol and other drugs of addiction 01327 264531

Listening friends scheme

Help from pharmacists trained in dealing with stress 020 7572 2442

Pharmaceutical press

Purchase of books and subscriptions to journals 01767 604971; fax 01767 601640; custserv@turpin-distribution.com; website www.pharmpress.com