

Opportunity to be creative

By the time readers receive their next issue of *The Journal*, the Royal Pharmaceutical Society's Council will have decided at what level to set the retention fees for individual pharmacists for 2008. Although members may hope that the Council will make huge concessions in response to their outcry, the reality is that it has relatively little room to manoeuvre, as the Treasurer has explained in these pages on a number of occasions since the announcement was made in August.

So what concessions can the Council make? *The Journal* hopes that comparisons have been made with the fee structures of other health profession regulators, especially the

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General Medical Council's creative fee structure, which seems ahead of the game.

Introducing a system of staged, say quarterly, payments is long overdue. Hitherto, the Society has rejected this option, which has been raised time and again by correspondents to *The Journal* over many years. However, when there is sufficient political will anything is possible,

and the Treasurer has indicated that the Society is investigating the possibility of offering staged payments (*PJ*, 18 August, p190). Quarterly payments, for example, are offered by the GMC for those paying by direct debit.

The difficulty for many pharmacists is that the due date falls at arguably the most expensive time of the year. Here, another leaf could be taken out of the GMC's book. Retention fees for doctors are paid annually but are due on the anniversary of the date the doctor joined the medical register. There must be some administrative advantages of not having to process all fees at the same time.

The GMC currently waives fees for doctors over the age of 65 years. Although the Society offers its members more than just registration and regulation, it could consider offering a heavily discounted fee for members over the age of 65 years — particularly if they would otherwise leave the Register and stop offering their services as locums.

Finally, the question of a reduction for pharmacists who work part-time is often raised. The Society in the past has argued that it costs the same to register and regulate a pharmacist irrespective of the hours that they work. Nevertheless, the GMC — presumably facing similar costs as the Society for registering and regulating registrants whether they work part- or full-time — is able to offer a low-income discount. Doctors earning less than £19,700 per annum are eligible. Pharmacists might wish to argue that that would be a figure worth adopting by the Society but, bearing in mind the different earning capacity of the pharmacy profession and the medical profession, offering a discount to pharmacists who earn, say, less than £12,000 per annum might prove to be a popular move. Let us hope that the Council is able to be as imaginative as the GMC in its response to the Society's fees consultation.

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