

# Public health services in a commercial environment: are you for or against it?

To celebrate its 21st anniversary last week, public health charity PharmacyHealthLink hosted a debate. Dawn Connelly reports

Should community pharmacies be offering healthy lifestyle advice while selling confectionery and hangover remedies? This was among the questions raised last week when influential advocates for pharmacy and public health, the pharmaceutical industry and Parliament came together to debate whether community pharmacy can perform a public health role in a commercial environment. The result was both heated and, at times, light-hearted.

Those proposing and opposing the motion — “This house believes that community pharmacy cannot perform a public health role in a commercial environment” — were drawn from PharmacyHealthLink (PHLink) trustees, GPs and other professionals involved in public health. The debate was chaired by Lord Tim Clement-Jones, patron of PHLink.

A baseline vote indicated that the proposers, not surprisingly, were in for an uphill struggle, with five people for the motion and 41 against it.

## Arguing for the motion

First up was Geof Rayner, a trustee of PHLink and a freelance consultant in the voluntary and public sectors, speaking in support of the motion.

Dr Rayner argued public health is incompatible with the domination of pharmacy by large corporations. He highlighted that half of pharmacy chains in Britain are now controlled by foreign companies. “Do we want to be a division of a corporation,” he asked.

He painted a picture of two future worlds: one in which everything is about the bottom line and pharmacists are drones of foreign corporations; and one in which “honourable pharmacy” is practised without the trappings of commerce, trust is rediscovered and people are empowered to take control of their own health.

Dr Rayner also argued that commercialism creates a consumer model of health in which poorer people are underserved because they do not deliver the same level of profits as other people.

The motion was seconded by Terry Maguire, a trustee of PHLink and an independent community pharmacist in Belfast. Dr Maguire said that there is no evidence pharmacy has seized opportunities to provide public health services. “Pharmacy just doesn’t seem to want them,” he argued. He highlighted several examples, which he believes illustrate an unwillingness of pharmacy to get involved in public health programmes for commercial reasons. These included a supermarket that pulled out of an emergency hormonal contraception scheme because elderly customers objected



Andy Murdock and Simon Fradd

and a group of pharmacies in Wales that stopped providing methadone services because it upset their middle-class customers.

Dr Maguire argued that too many pharmacies still sell confectionery, hangover remedies and sun creams with low sun protection factors. Why, he asked. Because pharmacies are going along with what customers want.

## Arguing against the motion

Opposing the motion was Simon Fradd, a GP and chairman of Concordia Health, which runs two GP practices in London. He believes it is nonsense to suppose that commercial aspects cannot be combined with public health. “Are you telling me that you don’t want to sell over-the-counter products, such as nicotine replacement therapy or post-coital contraception? Are you telling me that they are not profitable,” he asked.

He highlighted the benefits of public health services provided from pharmacies, saying that up to 25 per cent of people attending accident and emergency and 50 per cent of those taking GP appointments could be self-caring and therefore handled by pharmacists. He added: “You have to grasp the opportunity with both hands and work as one health economy, not a series of providers.”

Dr Fradd said that commercial organisations draw people in by focusing on their health. “That gives you the opportunity to give the public health message.”

Andy Murdock, a past trustee of PHLink and director of Lloydspharmacy, also argued against the motion. “Public health should unite commercial and non-commercial organisations because the public health issue is so serious for the future of health care in the

UK,” he said. Community pharmacy not only can, but does perform a public health role in a commercial environment, he added. He also pointed out that pharmacies are no more or less a profit generating unit than GP surgeries. “And no one to my knowledge has ever suggested that GPs should stop providing public health services in their commercial environment,” he added.

Mr Murdock said that consumers, customers and patients have the right to access health information through whatever channels they choose. “A mixed economy is the order of the day,” he exclaimed. “A one-size-fits-all mindset is a concept that is so outdated it now appears ludicrous. Delivery of public health between the state and the private sector is the only way forward,” he added.

## Discussion

After these impassioned speeches, an indicative vote was taken before opening the debate up to the floor. The result indicated that six people had been swayed in favour of the motion — 11 for, 35 against.

Roger Odd, a trustee of the Patients’ Association, and Sheila Kelly, executive director of the Proprietary Association of Great Britain, both expressed their dismay that this “myth” was still alive. Research shows that people trust their pharmacist, said Mrs Kelly. They have this trust, she said, because they have experienced a pharmacist who has taken the time to ask questions and has not just sold them products for the sake of it.

Claire Anderson, professor of social pharmacy at the University of Nottingham, proposed that the debate is really about professionalism rather than commercialism. “Isn’t it when people aren’t so professional that it goes wrong,” she asked.

Dilip Joshi, chairman of the National Pharmacy Association, pointed out that, because of a lack of investment, pharmacists have had to participate in commercial activities that often underpin other services.

Georgina Craig, head of communications and partnership development at the Company Chemists’ Association, suggested that both proposers and opposers were agreeing. “Terry and Geof have talked about concentrating on the patient in front of you and addressing their needs. Anyone who works in a commercial environment knows that the secret to real business success is customer loyalty by perfectly meeting the needs of the individual customer. From my perspective, that’s where pharmacy and public health come together.”

The debate closed with a final vote. The result — five for and 41 against.

The PharmacyHealthLink debate and reception took place in London on 15 November