

Network News

Issue 1: January 2004

Local networks, local leadership

The Royal Pharmaceutical Society is going through a period of rapid change, and we still do not know what the endpoint will be. What we do know is that having a strong local branch and regional network is crucial for pharmacists' futures as health professionals operating in an environment that is driven by local need. Effective local leadership is necessary to capitalise on the promise of recent pharmacy policy documents.

The local branch may be the only face of the Society that many pharmacists see during their professional careers. The opportunity to meet with others, and to hear about topical issues — be they clinical or political — is invaluable, and yet all too often ignored.

The committees of local branches and regions are fascinating in terms of their diversity and level of activity. Some committees soldier on bravely in the face of apathy from the local pharmacist community: others enjoy consistently high attendance and push forward with pharmacy development.

Perhaps some speculative statistics, grounded in our experience of the network, will underline the impressive level of participation and activity that we see within local networks within any one year:

- 130 branches across England, Scotland and Wales
- Assuming an average of four committee members per branch = 520 pharmacists actively involved in local leadership
- With meetings at least six times a year = 780 local meetings
- Attracting 10 per cent of the Register resident in GB = 4,000 local pharmacists connecting with peers
- And newsletters circulated at least three times to most members = 120,000 opportunities to engage pharmacists in professional debate

It would be interesting to know what motivates pharmacists to become committee members. The goodwill that is shown by hundreds of pharmacists in getting involved benefits the whole profession. The chance of revival for inactive branches and regions is dependent upon local pharmacists' vision and commitment. We are fortunate to have relatively few ailing branches, and to have seen some truly impressive 'comebacks'.

It is true that the advent of continuing professional development for pharmacists is



an opportunity to focus on an issue that is a concern for pharmacists from all sectors of practice. The existence of this forum for mentoring and sharing advice is a local strength.

There is also a role for local branches to raise their profile as a point of contact for other health professionals and commissioners who wish to access a definitive pharmacy viewpoint. Having pharmacist members from different sectors of the profession makes the branch a useful vehicle for developing joined-up local thinking and a possible source of new ways of working. Some branches have collaborated with other organisations (such as the local pharmacy development group or the local pharmaceutical committee). This maximises the benefits of co-ordinated local communication and minimises duplicated discussions and meetings.

Branches also have an important role to play in raising the profile of the pharmacy profession in the media. The Society's central PR unit works to support branch public relations officers and help them to highlight the work of pharmacists in the pages of local newspapers and also on regional radio and television channels.

We do not yet know the recipe for success: all we can do is to report what seems to work and hope that we can share good ideas effectively. In the quest for effective local leadership, branches and regions point the way. — From Dr Nicola Gray, member of the Royal Pharmaceutical Society's Council and Council sponsor for the "Shape up for the future" review of the Society's branches and regions.

What *Network News* can do for you and your branch

Twice a year *Network News* will appear as a pull-out centre section in *The Pharmaceutical Journal*, carrying details of Society branch and regional meetings in the coming months. As you will see from the diary pages (overleaf), it is not comprehensive but is designed to give advance notice of local meetings so that the relevant dates can be put in your diary. The next issue of *Network News* will be published in late August in time for the autumn programme and then in the penultimate issue of 2004, which will carry listings for the first half of 2005.

Members should be reassured that it will not replace the information that appears in *The Journal* in the issue immediately before a meeting takes place. Full details of meetings, giving time and venue, etc, will continue to be published. *Network News* will not, in addition, replace either the mailings that some branches send members or the details that appear on branch websites. However, it is hoped that as *Network News* becomes established, some branches will decide that it enables them to keep in touch with members without the cost of a branch mailing and it is just as effective a way of communication.

You will see from this first issue that *Network News* will also carry features. There is an item on the last page about how the fortunes of one branch were revived. Future issues will look at different ways of gaining sponsorship for meetings, what issues have proved to be most popular in different parts of the country and how newly registered pharmacists can be persuaded to attend meetings.

Network News will depend on you. If you have a story to tell, do let *The Journal* know. If you are a committee member and wish to find out how other branches have tackled a problem, *The Journal* will try and help. Alternatively, if you would like to write about your own successes, please put pen to paper or finger to key: although *Network News* will only appear twice a year as a pull-out section, it will be published in the Society section on other occasions when there is sufficient material.

Send your suggestions to *Network News* c/o *The Pharmaceutical Journal*, 1 Lambeth High Street, London SE1 7JN. E-mail: network.news@pharmj.org.uk

Branch programmes, January to June 2004

The Royal Pharmaceutical Society's membership unit has compiled the following provisional programme of branch meetings during the first half of 2004 to help members plan their meeting attendance. Members should note that the details of some meeting are still to be finalised. Additional and revised information will appear in the Diary section of *PJ Online* (www.pjonline.com/diary) and in

The Pharmaceutical Journal's weekly Diary column, which gives details of meetings for eight days from the Monday following the publication date of the issue.

Members should also note that they are normally free to attend meetings of any branch and not just the one to which they have been allocated or which they have chosen to join.

Ayrshire to Brighton

Branch	Date	Topic
Ayrshire	20 January	Heartstart training
	17 February	Pharmacy role in public health and drug misuse
	30 March	The end of NHS trusts: what is happening?
	27 April	The new pharmacy contract/ AGM
	18 May	Quiz night
Barnet	11 February	Evidence based counter prescribing
	10 March	AGM/Anaphylaxis treatment
	21 April	Common eyelid problems
	10 June	<i>to be announced</i>
Bath	21 January	Magnetic resonance imaging
	11 February	Youth and pharmacy
	25 March	Hyperlipidaemia
	5 May	Electronic transfer of prescriptions/AGM
Bedfordshire	28 January	Diabetes update
	11 March	Drug interactions: cytochrome P450
	7 April	AGM/Pharmacist prescribing
Birmingham	<i>programme to be announced</i>	
Bolton	13 January	Obesity
	10 February	AGM
	6 April	Erectile dysfunction
	13 May	<i>to be announced</i>
	10 June	<i>to be announced</i>
Bradford	January	<i>to be announced</i>
	10 February	AGM/Presidential address by Dr Gillian Haworth
	24 March April	Views of the inspector Pharmacist prescribing
Brighton	13 January	Irritable bowel disease
	4 February	Acid-related diseases
	3 March	Hepatitis C transmission: Therapeutic management and treatment
	29 April	AGM/Discussion of motions for BRM

AGM = annual general meeting
BRM = branch representatives' meeting

Bristol to Durham

Branch	Date	Topic
Bristol	29 January	Ophthalmology
	18 February	Renal disease
	30 March	Paediatrics
	29 April	AGM/Meningitis
	18 May	Infertility/fertility treatment
	30 June	Tuberculosis
Bromley	19 January	Osteopathy
	9 February	Palliative care
	15 March	Wound management
	19 April 17 May	AGM <i>to be announced</i>
Bury and Rochdale	23 February	Supplementary prescribing
	29 March	Mental health update
	26 April	Children's National Service Framework/AGM
Central Lancashire	3 February	AGM/Continuing professional development
	5 May	<i>to be announced</i>
Chelmsford	22 January	Topics of current interest
	24 February	E-prescribing
	25 March	Children's National Service Framework
	27 April	Discussion of motions for BRM
	20 May	Prevention of osteoporosis
	22 June	Prostatic matters
Coventry and Warwickshire	13 January	Mental health
	10 February	Mental health
	9 March	Mental health
	13 April	AGM/Mental health
	11 May	Mental health
Crawley, Horsham and Reigate	4(?) February	Respiratory disorders
	10 March	Diabetes/AGM
	7 April	Migraine
Croydon	27 January	Supplementary prescribing
	24 February	Diabetes 1
	30 March	Diabetes 2
	27 April	Diabetes 3
	Durham	20 January
24 February	Clinical governance	
23 March	New pharmacy contract	
20 April	AGM	

East Cumberland to Halifax

Branch	Date	Topic
East Cumberland	21 January	Cumbria Emergency Doctors On Call (CUEDOC)
	25 February	Medical aspects of mountain rescue
	23(?) March	Pharmacy prescribing
	April	AGM
East Kent	26 January	Visit by President (Dr Gillian Haworth)
	2 March	New Medway School of Pharmacy
	5 April	Cardiovascular or respiratory topic
	20 May	Dinner
East Metropolitan	20 January	Diabetes
	17 February	Use of pathology laboratory reports in diagnosis
	16 March	Over-the-counter statins and POM-to-P changes
27 April	Recent advances in dermatology/AGM	
Eastbourne	14 January	Pharmacy staff training
	9 February	Eastbourne Downs Pharmacy Forum
	5 March	Dinner/Building on the past
Edinburgh and Lothians	16 January	Underground city tour
	5 February	The right medicine: year 2
	11 March	Emergency planning
	29 April	AGM/Sun, skin and safety
Glasgow and West of Scotland	15 January	Delivering gene therapies
	22 January	Burns supper
	12 February	Glasgow's new Centre for Population Health (43rd Todd Lecture)
	11 March	The Right Medicine
	29 April	AGM
Halifax	22 January	AGM
	26 February	Retarding the progression of renal failure
	25 March	Cystic fibrosis
	22 April	Eczema

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No programme information was received from the following branches: Aberdeen and North Eastern Scottish, Barking and Havering, Bro Myrddin, Buckinghamshire, Burnley, Cambridge, Cardiff and Vale of Glamorgan, Ceredigion, Cheltenham and Gloucester, Chesterfield, Clwyd, Colchester, Cornish, Derby, Doncaster, Dorset, Dudley and Stourbridge, Dumfries and Galloway, Dundee and Eastern Scottish, Ealing, Enfield, Epsom, Exeter, Fife, Great Yarmouth and Waveney, Grimby, Guernsey, Gwent, Gwynedd, Harrogate, Hastings, Hounslow, Hull, Jersey, Lancaster,

Lincoln, Liverpool, Mansfield, Medway, Mid Glamorgan East, Morgannwg, North-East Lancashire, North Hampshire, North Metropolitan, Northamptonshire, Northumbrian, Penfro, Powys, Scunthorpe, Shropshire, Solihull, Somerset County, South Cumbria, South East Metropolitan, South Essex, South Lincolnshire, Southampton, Stirling and Central Scottish, Stockport, Sunderland, Swindon, Torbay, Walsall and Wolverhampton, Warrington, West Hertfordshire, Wigan, Wirral, Worcester, York.

Harrow and Hillingdon to Manchester

Branch	Date	Topic
Harrow and Hillingdon	27 January	<i>to be announced</i>
	24 February	<i>to be announced</i>
	30 March	<i>to be announced</i>
	27 April	<i>to be announced</i>
Hereford	10 February	Management of stroke
	10 March	National Service Framework for Older People
	1 April (<i>ttc</i>)	<i>to be confirmed</i>
Hertford	26 January	Getting ready for continuing professional development
	3 March	Medication errors
	27 April	Neurology case study/AGM
Huddersfield	8 January	Medications errors
	5 February	AGM
	26 March	Dinner
Ipswich	4 February	Working dinner: National Service Framework for Older People
	3 March	Multiple sclerosis and cannabis
	6 April	Ipswich Home Assessment and Rehabilitation Project
	6 May	To take or not to take!/AGM
Isle of Man	14 January	Enteral feeding
	15 March	Pharmacy in the prison service
	29 April	AGM
Isle of Wight	21 January	Social evening
	4 February	Children's National Service Framework
	11 March	Treatment of chronic pain
	21 April	AGM
Lanarkshire	16 January	Quiz night
	19 February	An inspector calls
	11 March	Small animal medicines
	8 April	AGM/Sports medicine
	7 May	35th anniversary dinner
Leeds	21 January	AGM/I'm isolated: help me to do my CPD
	25 February	Pharmacy in the prison service
	24 March	Medicines management and the National Service Framework for Older People
	19 May	Supplementary prescribing
Leicestershire and Rutland	13 January	Diabetes management
	10 February	Medicines management and the National Service Framework for Older People
	9 March	The new contract
	6 April	AGM/Forensic pharmacy
Macclesfield	2 February	AGM
	24 March	Parkinson's disease
	29 April	Cannabis: from plant to patient
Manchester, Salford and Trafford	29 January	The vision for pharmacy
	19 February	Continuing professional development
	24 March	Identifying, meeting and assessing training outcomes of CPD needs
	April	Pharmacist prescribing

Moray and Banff to Sefton

Branch	Date	Topic
Moray and Banff	13 January	<i>to be announced</i>
	10 February	<i>to be announced</i>
	1 March	<i>The Pharmaceutical Journal</i> (jointly with Northern Scottish branch)
	13 April	<i>to be announced</i>
North Staffordshire	15 January	AGM
	12 February	NPA meeting
	11 March	Supplementary prescribing
Northern Scottish	13 January	Local research forum
	3 February	Supplementary prescribing for pharmacists
	1 March	<i>The Pharmaceutical Journal</i> (jointly with Moray and Banff branch)
	6 April	AGM
	20 April	Discussion of motions for BRM
Norwich	2 February	Medicines management: the Homer trial
	25 March	Pharmacy practice research
Nottingham	12 January	Starting with continuing professional development
	9 February	CBRN, smallpox and SARS: a beginners guide to health protection and emergency planning
	8 March	Opportunities for pharmacists (panel discussion)
	13 March	Dinner dance
	26 April	AGM
Oxfordshire	13 January	Linking pharmacists with children's clinics
	10 February	Advising on dental health
	31 March	Changes in Controlled Drug legislation post-Shipman
	20 April	Managing common ear, nose and throat problems
	11 May	Sleep apnoea/AGM
Plymouth	23 March	AGM
	May	Wound management
Portsmouth	3 February	Diagnosis and management of dermatological problems
	9 March	Patient safety
	23 March	AGM
	May	Wound management
Reading	21 January	Asthma
	17 February	An inspector calls
	16 March	Rheumatic diseases
	21 April	Cannabis/AGM
	4 May	Women's health
Scottish Borders	11 February	AGM
	6 May	Evening with the President (Dr Gill Hawksworth)
Sefton	2 February	AGM
	1 March	Obesity
	5 April	Clinical governance
	3 May	Joint meeting with local primary care trusts

AGM = annual general meeting
BRM = branch representatives' meeting

Sheffield to Worthing and West Sussex

Branch	Date	Topic
Sheffield	6 January	Food sensitivities and intolerances
	4 February	Erectile dysfunction
	4 March	Anticoagulation and the community treatment of deep vein thromboses
	6 April	Dental health and mouth care
	6 May	Recent changes in Controlled Drug legislation
Slough	19 January	Chiropody
	26 February	Safety of herbal medicines
	25 March	Pharmaceutical care
	19 April	Immunosuppression in organ transplants with Rapamune
	11 May	Wound dressings
South Cheshire	20 January	Asthma update
	10 February	Pharmacist's extended role
	March	Current issues
	22 April	AGM
South Staffordshire	15 January	Can I take alcohol?
	11 February	AGM/Dinner
	11 March	Stroke rehabilitation
	21 April	The eyes have it
South West Metropolitan	10 February	Male health
	9 March	Diabetes workshop
	13 April	Advances in diabetes
	11 May	Pharmacist prescribers
Teesside	February	An inspector calls
	March	Ophthalmology
	April	AGM
	May	Continuing professional development forum
Thames Valley	2 March	Local pilot study of physician-pharmacist referral for treatment of minor ailments
	March	Centenary celebration
	19 May	Interactions and little known effects of commonly used dietary supplements
Weald of Kent	12 February	Error reporting/risk management
	25 March	New contract for pharmacy
	20 May	Obesity management
West Cumberland	14 January	AGM
	11 February	Treatment of diabetes
	10 March	Current topics
	14 April	<i>to be arranged</i>
West Metropolitan	28 January	Continuing professional development
	31 March	New opportunities for pharmacists
	19 May	Coronary heart disease
West Surrey	10 February	Osteoporosis
	14 March	All day conference on issues in pharmacy for West Surrey
	13 April	Cardiology/AGM
	11 May	Palliative care
Worthing and West Sussex	27 January	Advance wound care
	6 April	Getting ahead with headaches
	19 May	Tour of Worthing library/AGM

How the Norwich and Norfolk branch was revived

Until the summer of 2000, the activities of the Norwich and Norfolk branch of the Royal Pharmaceutical Society relied on a small group of individuals who were struggling to maintain local interest. The same faces would attend the meetings but eventually even they started to question the value of their activities. Over the next year the branch drifted into a state of dormancy.

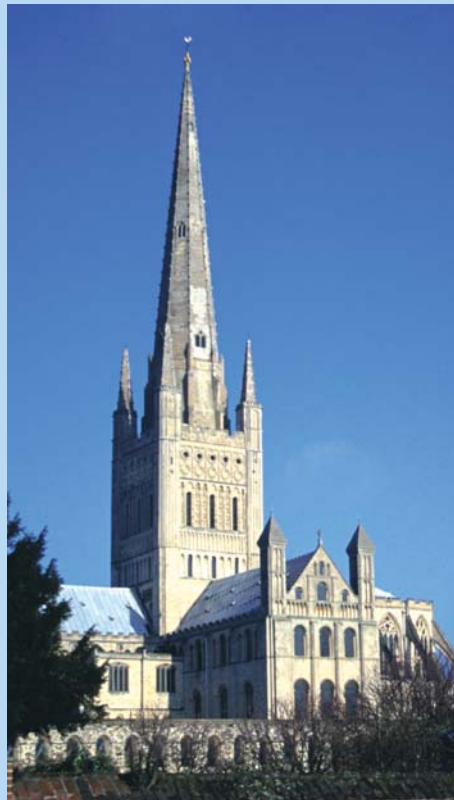
Dr Maria Christou, now secretary of the branch, says: "The problem was that members could not see a link between their day-to-day work as pharmacists and what the branch was trying to provide with regards to professional issues. Many participate in meetings after a long day at work and as a result the branch became dormant in summer 2001."

Once the branch stopped holding meetings local pharmacists soon began to believe there was a need to bring together colleagues from different sectors of practice and importantly, to introduce preregistration trainees to the profession. They thought that a unified local voice was needed for the profession together with a forum where isolated rural pharmacists could come together and discuss issues relating to their work.

Dr Christou explains: "Without branch meetings there is often little to bring local pharmacists together and this leads to a lack of understanding of the different roles within the profession. Added to this there can be complete isolation of pharmacists, particularly those practising in rural areas. All of this can contribute to a loss of momentum for development, change and improvements in services." Pharmacists in Norwich and Norfolk missed their branch and it was decided in 2002 that the time was right for a relaunch.

Says Maria Christou: "The first step was to re-form the branch committee with members who felt that it was particularly important to have an active branch in the area. We were fortunate that David Coleman — a highly respected Norfolk community pharmacist and a former president of the Society — agreed to act as chairman of the new committee. David had clear ideas about introducing a programme of activities that would be both interesting and relevant to members from all sectors of pharmacy. He was also clear that we should give our members a sense of ownership of their local branch."

The Norwich and Norfolk branch committee was keen to follow the example set by its neighbouring committee in the Ipswich branch, which had also experienced problems in the past but had been successful in re-building local interest. Katie Smith, secretary of the Society's Anglia region and coincidentally also Ipswich branch secretary,



Norwich Cathedral

helped to prepare a programme of events aimed at the full spectrum of pharmacists. Indeed, the new committee itself consisted of members who represented all sectors of the profession. An added bonus was that those from the Academic Pharmacy Practice Unit based at the University of East Anglia (UEA) had considerable experience of organising and promoting events.

Dr Christou explains: "As a branch, we had a successful relaunch in October 2002 when around 80 members attended to hear Ann Lewis, the Society's Secretary and Registrar, give a guest speech on the Society's programme of reform. We subsequently ran successful meetings on topical issues such as repeat and supplementary prescribing and the new MPharm course at the UEA."

The Norwich and Norfolk branch committee planned meeting topics that were relevant to their target audience and these were confirmed only after consultation with the local membership. The committee also took great care with the selection of attractive and accessible venues with plenty of parking. In addition to an annual programme of events, each meeting was advertised via a mail-shot

to branch members which included a reply slip and deadline for responses. Certificates of attendance were also produced for those coming to meetings.

The structure of the meetings was designed with pharmacists' work and travel needs in mind. Meetings start with a buffet provided at 7.30pm, then speakers make their presentations from 8pm, followed by questions and informal discussions before the finish at about 9.30pm.

Today the Norwich and Norfolk branch has 465 members and 30 per cent of them have become regular attenders at meetings, compared with less than 10 per cent before 2001.

There is no doubt that the revival in the fortunes of Norwich and Norfolk branch is benefiting local pharmacists. The fresh approach to the organisation and delivery of an annual programme that is focused on members' needs has enabled them to feel their participation is important. As Dr Christou explains: "Pharmacists now feel it is in their interest to come, listen and discuss the big issues facing the profession and they now have a forum to do that in, even if they may disagree with some of the changes being proposed."

Norwich and Norfolk branch members are now looking forward to a further four meetings planned before April 2004, again focusing on big issues that are topical and affect all sectors of pharmacy. These include "Technician registration: skill mix issues", "Mandatory CPD for pharmacists", "Medicines management: the Homer trial" and "Pharmacy practice research".

Future plans include taking an active part in promoting CPD in the county, once the Society's framework has been rolled out in early 2004. Other plans include raising the profile of the branch (and therefore the pharmacy profession) in primary care trusts and among local government officials and members of Parliament.

Dr Christou would encourage other branches wanting to review their programmes or thinking of relaunching to contact the Society's membership unit for support. She adds: "It is important not to let the mundane administrative side or the financial issues be obstacles. Our experience has been that staff in the Society's Membership Unit can offer a lot of support on both these issues, provided there is commitment from the Branch as to what it wants to achieve locally."

For further information and ideas about the revitalisation of your local branch, please contact the Society's membership unit (tel 020 7572 2331; e-mail b&ra@rpsgb.org.uk). — From Jean-Pierre Moser, head of public relations and membership for the Royal Pharmaceutical Society.

Network News is produced by *The Pharmaceutical Journal* as a service to members of the Society resident in Great Britain.