

# Why splitting is better for everyone

By Mark Koziol, chairman of the Pharmacists' Defence Association

With the amount of time and effort expended by the profession on considering its identity in the past few years, it will be of little surprise if members view yet another debate with disinterest and cynicism. The problem is the Government's constantly shifting position on how it wants pharmacy regulated.

Just when everyone thought it was safe to move on with the Royal Pharmaceutical Society as a dual role body, the Government's position has changed again and it looks as if the agony is going to be further prolonged.

However, if the dual role of the Society is split once and for all, then this could be the last time that we will need to worry about what designs the Government has over the future of our professional body as a regulator.

Let us consider the forces that are at work. At the Pharmacists' Defence Association we understand that the regulation of pharmacists is important, but it is our firmly held belief that what pharmacists are currently enduring is an exercise of unnecessarily enthusiastic proportions. About a decade ago there were no more than 33 cases considered by the Infringements Committee in one year but, in 2005, this rose to an unprecedented 874 cases which were concluded. Pharmacy has never had its regulatory credentials called into question in the past, so there can be no suggestion that the Society has previously swept cases under the carpet.

So why has there been such a dramatic increase in regulatory activity? Could this be because pharmacists generally are sinking to depths of poor practice and negligent behaviour — I do not believe so for a minute.

In my view, the new systems and processes introduced by the Society have led to the current state of affairs. These processes have required inspectors to transform all investigations into formal ones, resulting in formal consequences. This new regime expects even minor misdemeanours, such as trivial technical errors that can cause no harm to anyone, to result in a formal professional disciplinary record being set up against the pharmacist in question. Until recently, they even considered traffic light offences worthy of their attention — this is regulation gone mad!

In my view, we have a new ideology at Lambeth which has produced a record number of referrals not just to the Infringements Committee but also to the Statutory Committee.

Statutory Committee Chairman (*PJ*, 14 October, p461).

The PDA routinely supports its members in these types of cases and we believe that they are symptomatic, not of an epidemic of poor practice by pharmacists, but because the Society is embarrassed by its dual role and attempts to mitigate its position to Government by demonstrating that it is one of the most solid of regulators — through high volumes of regulatory activity. Nearly every complaint made against a pharmacist is sent to the Infringements Committee. No local resolution (as used to be the case) exists.

Let us consider the effects of this: with approximately 39,000 practising pharmacists on the register, 874 cases were considered by the Infringements Committee last year. This is broadly the equivalent of one in 44 pharmacists undergoing an investigation. This compares, according to figures from their respective annual reports, to one in 52 doctors, one in 180 dentists and one in 256 nurses, being referred to their investigating committee.

Fair regulation by the Society is one thing; overzealous pursuit is quite another. Is it perhaps prompted not so much by a strict desire to protect the public, but more to protect the Society's dual role credentials? Surely, this is too high a price to pay to justify the Society's continuing involvement in regulation. The real life consequence is that as every day goes by, the profession learns to walk in fear of the Society. Pharmacists see it as the enemy — disrupting their lives, affecting their health and that of their family. Consider the human costs to those pharmacists put through months of anguish and uncertainty often completely unnecessarily because they have done little, if anything at all wrong. The more overtly it regulates, the more the Society damages its relationship with members.

In its defence, the Fitness to Practise and Legal Affairs Directorate claims that the formalised procedures, which have largely replaced the more discretionary ones used by inspectors only a few years ago, are better for all, pharmacists and patients. The irony is that while the Society has indeed succeeded in becoming the toughest health care regulator, it has perhaps inadvertently pushed the profession into bringing about the end of its involvement in the regulation of pharmacists altogether. If regulation was ceded to the Government, I believe a stand-alone regulator would not have its credentials questioned in the same way and it would not have to compensate by producing high volumes of

committee referrals and might result in pharmacists being involved in fewer disciplinary episodes.

For several years the Society has had to indulge the Government's regulatory agenda. There was the painful Charter debate, then the debacle over mandatory continuing professional development which resulted in experienced pharmacists leaving the practising register.

Imagine for a moment what it would be like if the Society could concentrate exclusively on membership issues. Imagine if the time that the Council spent on the consideration of the Section 60 regulatory Order (a year or more) was instead applied to preparing itself for the All Party Pharmacy Group enquiry into pharmacy which currently took up no more than a few hours of its time. Imagine if the Society had thrown its weight and resources behind the provision of medicine use reviews by pharmacists.

Imagine if the Society could properly support leading edge practice by evaluating and nurturing, by creating the appropriate risk management frameworks and by acting as the advocate for pharmacists. The Society could succeed in moving far more leading edge work into the main stream of practice. This is how a profession grows and develops.

Imagine if the Society could apply its resources to supporting the branch networks, giving them a new role to provide local support to practice developments and CPD.

Imagine how much richer as a professional body the Society could be if it could actively encourage those experienced pharmacists not only to remain as members of the Society but also to play an active role in its affairs.

But why should any of this be of interest to a defence association? It is because we have learnt through the experience of working with pharmacists who are in difficulties just how much support they require to enable them to do their jobs safely and well. We want to see a new focus on safety and practice issues and a new supportive culture emerge from the Society. We want pharmacists to be able to turn to their professional body confident in the knowledge that they will receive encouragement and support and not a prosecution or disciplinary investigation.

We want pharmacists to receive help from the Society when they undertake their CPD and not a threat of removal from the register if they fail. The Society must not squander any more resources on entertaining further the Government's constantly moving regulatory agenda.

A Society unshackled from the role of regulation will be able to accomplish far more for pharmacists and patients alike. The Council at its December meeting can make it happen.

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