

# Why government should promote not cut investment in pharmacy education

By **Anthony Smith**, principal and dean, and **David Taylor**, professor of pharmaceutical and public health policy, at the School of Pharmacy, University of London

Pharmacy is being increasingly expected by the public, by policy makers and by members of other professions to extend its contribution to effective medicines use and the achievement of better health outcomes. The University of London School of Pharmacy's latest policy paper ("Greater expectations: pharmacy-based health care — the future for Europe?", available at [www.pharmacy.ac.uk](http://www.pharmacy.ac.uk)) highlights the fact that across Europe members of the profession have a historic opportunity to widen the range of clinical and allied health services they provide, while continuing to play a vital role in the wider medicines supply chain.

As community-based medical and nursing care becomes more focused on supporting people with complex needs, pharmacies will, with growing frequency, be able to serve as direct healthcare access points for the majority of the population. To achieve this, pharmacists must be able to enhance their skills continuously. The profession must attract individuals not only with high intelligence and the ability to excel in the pharmaceutical sciences but also with the experience and personalities required for the support of appropriate medicines-taking and health-related behaviour changes.

Once qualified, pharmacists will need access to sophisticated resources that will help them to go on building the competencies required by fast changing societies with rising health expectations. Our research indicates that the UK, thanks to both its hospital-based clinical pharmacy heritage and strong ministerial direction in relation to community service development, is well placed to lead European pharmacy-based healthcare development.

However, this position is to a degree threatened by proposals recently put forward by the Department for Innovation, Universities and Skills. The DIUS's suggested new approach to Equivalent and Lower

Qualifications (ELQs) would cut off public funding for students who have already taken a degree course to study pharmacy at the undergraduate level. It could similarly reduce qualified individuals' access to ongoing post-graduate education.

The reasons for this policy change, which some well placed commentators believe will significantly threaten the future of valued institutions such as the Open University and Birkbeck College, are understandable.

The Government wishes to increase the proportion of the workforce with higher educational qualifications. It therefore plans to divert upwards of £100m away from supporting people who have already been to university into the provision of foundation degrees for those who have not yet had the opportunity to benefit from higher education.

Foundation degrees are intermediate level, work-related qualifications that may provide the individuals who take them with a starting point for further studies. The Government also hopes that employers will move to fund more educational opportunities for graduates seeking to develop further their knowledge and abilities,

so that in total overall spending on higher education will increase.

Few would doubt that such thinking is well intended. Yet Richard Lambert, director-general of the Confederation of British Industry, argued in December last year that the DIUS's proposals represent a high risk experiment. At worst it will shift resources away from tried and tested educational activities into less productive areas. Mr Lambert also questioned the willingness of CBI members to close the higher education funding gap for existing graduates that the new policy will open. He also argued that from a national interest perspective it may often be more useful to help the latter to achieve their full potential, rather than to increase the number of foundation degree holders.

In pharmacy's case, the ELQ policy debate

has another important dimension, in that other health professions, such as medicine and nursing, will be exempted from the proposed changes. Individuals who already have degrees will still be funded to study the latter, if they chose to do so. Yet they will not be able to claim public support should they wish to undertake a pharmacy degree.

This may well deprive pharmacy, which from a national scientific perspective is arguably a strategically significant area of study, of individuals who could play an important future part in taking it forward as a healthcare profession. As they currently stand, the DIUS's ELQ proposals would also, after a transitional period, have a significant financial impact on pharmacy schools and departments that have in the past offered undergraduate places to students who have already taken initial degrees.

Educational institutions that are only worried about their financial positions must be prepared to fight for sectional interests alone. We believe that the ELQ policy issues outlined here raise concerns that are relevant to the future of pharmacy as a whole, and the ongoing improvement of the services it can provide to the community. Hence, we hope that the Royal Pharmaceutical Society and interested members will investigate this issue further and, to the extent that they too conclude there is substantive reason for public concern, be willing to communicate this to MPs and to ministers and their advisers in as timely a way as possible. If pharmacy education is not adequately supported, rising public expectations will not be met.

*The House of Commons debated this topic on 8 January. A report of the debate is accessible via PJ Online ([www.pjonline.com/pjlinks](http://www.pjonline.com/pjlinks)). — EDITOR.*

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CPA

Pharmacists can become personal members of the Commonwealth Pharmaceutical Association, the fee for which is £10 a calendar year. The Commonwealth Pharmaceutical Association has been strongly supported since its foundation by the Royal Pharmaceutical Society.

Applications should be sent to the Betty Falconbridge, Administrator, Commonwealth Pharmaceutical Association, 1 Lambeth High Street, London SE1 7JN.