



# YOUR SOCIETY

## What's the Society REALLY for?

Do you want the good news or the bad news? The good news is we have a unique opportunity to design the future of professional leadership in pharmacy — your professional leadership.

The bad news? There isn't any really — the only bad news would be if the Royal Pharmaceutical Society, your Society, wasn't up for the challenge, and I see no sign of that.

Soon after I started my job last September I asked: "What's the Society really for?" The answer, of course, is in two parts. Our regulatory functions are for the protection of the public, through the promotion and maintenance of basic standards within the profession. All our other functions are for the profession itself, and specifically for individual pharmacists.

We don't do it for companies (although obviously many individual pharmacy proprietors and senior managers are members); we don't do it for other pharmacy organisations (although we're developing stronger and stronger links with other bodies where our interests complement each other); and we don't do it for other health professions or the government (although we're building constructive relationships in both those areas). We do it for you. Sounds cheesy I know, but it's pharmacy professionals that the Society is really for.

### What do members want?

So we set about finding out what you really want from the Society. We conducted the first phase of a market research programme in the autumn and the second phase is getting under way now. We started a series of open days in



Jeremy Holmes, Chief Executive of the Society, recaps what the Society has been doing and will do in the future for members

London and awareness events in Wales, building on the success of roadshows in Scotland. We set up an independent inquiry, chaired by Nigel Clarke, into the principles, functions and structure of a new professional body.

We also decided to invest more in communications — including the myRPSGB website and this newsletter. *Your Society* aims to let all our members know what we're doing (you told us we haven't been great at that in the past) and keep you up to date on the changes around the demerging of our two functions.

The Health & Social Care Bill, which provides the legislative framework for the new General Pharmaceutical Council is now going through Parliament. We are working with the Department of Health's Pharmacy Regulation and Leadership Oversight Group to make sure the transition to the GPhC is as smooth as possible (targeted for 2010), and its relationship with the new

professional body has the widest possible support within pharmacy.

But PRLOG is just that: a prologue. The main story is how we want to move forward and grasp the unprecedented opportunities that are now available to pharmacy as a clinical profession.

### Professional body's goals

To enable that, we see the new body having twin goals:

- Providing a strong, clear voice for pharmacy to maximise its profile and standing with the public, policy-makers and other stakeholders
- Leading and supporting pharmacists to enable them to realise their professional aspirations and deliver the best possible service to patients and the public

*Your Society* is one way we plan to keep you in touch with our thinking as we move towards these goals. I am also keen to understand members' views and, as we start the new year, I encourage *Your Society* readers to send me your top three pharmacy priorities for 2008. Please e-mail me at [positivefeedback@rpsgb.org](mailto:positivefeedback@rpsgb.org).

Jeremy Holmes, Editor

### WHAT IS YOUR SOCIETY?

*Your Society* is a monthly newsletter from the Royal Pharmaceutical Society of Great Britain. Produced by PJ Publications, it is designed to keep members abreast of developments at the Society, as its regulatory role is taken over by the General Pharmaceutical Council and it develops its professional leadership role.

## NEWSROUND

# Celebration of research

In December 2007 the Society held a joint event with the Pharmacy Practice Research Trust to mark the awarding of the PPRT bursary and research awards and the Society's Academic Excellence Awards.

Hemant Patel, the Society's President, Sir Graham Hart, former permanent secretary at the Department of Health and founder chairman of the PPRT, and Peter Curphey, PPRT trustee, were joined by researchers and their supervisors from schools of pharmacy across the UK at the event held at Church House, Westminster.

Sir Graham commended the awards for making a difference. He said: "Progress in pharmacy is being made, slowly but surely, and this is due in some part to the PPRT and the Society by their support of pharmacy practice research, the students and academic institutions."

Hemant Patel underlined the Society's commitment to education. He said: "Our vision is to make Britain the safest place in



Representatives of the Society and the Pharmacy Practice Research Trust celebrate the awarding of the PPRT bursary and research awards and the Society's Academic Excellence Awards

the world to take medicines and this vision requires schools of pharmacy to attract the best pharmacists into postgraduate research and training.

"The Society provides funding, through the Academic Excellence Awards, which were relaunched in 2006, to encourage and support

pharmacists who want to pursue a career in research to take that first step."

For further information about the Royal Pharmaceutical Society's Academic Excellence Awards contact [nana.clarke@rpsgb.org](mailto:nana.clarke@rpsgb.org) and for the PPRT Awards contact [beth.allen@rpsgb.org](mailto:beth.allen@rpsgb.org).

## Public involvement

The Society's first Patient and Public Involvement (PPI) annual report was submitted to Council at its December meeting. The report highlights the progress made between April and November 2007. A copy is available at [www.rpsgb.org](http://www.rpsgb.org).

## Open Day 2008

Following the success of its first open day in 2007 the Society will again open its doors to members on Sunday 13 April 2008. Jeremy Holmes, the Society's Chief Executive, said: "Last year's event was a leap in the dark but was very positively received by members. Going forward it will be vital for the Society to forge closer links with the membership and I very much look forward to welcoming members to what is, after all, their Society, in 2008."

## Did you know?

Even the smallest of the 45,000 objects in the Museum's collection has a story to tell. At only 2cm high, this ceramic jar once held Singleton's Eye Ointment. It dates from the 1700s, and is one of 18 in the museum's collection from different dates. According to the company, Singleton's Eye Ointment was first made in 1596 and the product continued to be made at 210 Lambeth Road until 1972, near the current Society headquarters in Lambeth High Street. The latest information sheet to be added to the Museum's web pages (at [www.rpsgb.org/museum](http://www.rpsgb.org/museum)) explores Lambeth's links with pharmacy.



# President raises his concerns about polyclinics with minister



Health Minister Dawn Primarolo attended the December Council dinner as a guest of Society President Hemant Patel

In a speech to guests at the Council dinner last month Society President Hemant Patel told guests

that, while the Society is not opposed to the concept of polyclinics, it is concerned that the

network of community pharmacies could be put at risk if the model is replicated around the country. He said: "I call for the study or appropriate impact assessment at local, regional and national level to ensure that public access to healthcare through improved services in pharmacies is enhanced and not reduced."

In her speech Health Minister Dawn Primarolo spoke about the central role that pharmacy has to play in helping to reduce health inequalities. She said: "I can see a day when pharmacies become recognised by all as centres for health literacy and healthy living and the public sees pharmacists as one of their most valued local community leaders."

## FOCUS ON THE PRESIDENT

# What drives Hemant Patel?

It was anger that drove the young Hemant Patel into pharmaceutical politics. Outraged at the financial difficulties facing a friend who owned a small pharmacy, he wrote a letter to the then editor of *The Pharmaceutical Journal*, who refused to print it because it had also been sent to a rival publication. Undeterred, Mr Patel offered to turn the letter into an article and the editor, up against a deadline, agreed to publish it providing it was on his desk within four hours.

The article struck such a chord with his colleagues that three months later he was elected to the Council of the Royal Pharmaceutical Society with the second highest vote in the country. Five years later, in 1998, he served his first term as President. He was elected to the post again in 2005 and has the distinction of being the first President since the Second World War to serve for three consecutive years, which come to an end in May.

The anger may have gone, but the passion and commitment remain. He has been secretary of his local pharmaceutical committee in North East London since 1995 and has also served as vice-chairman of the Pharmaceutical Services Negotiating Committee and chairman of the National Pharmacy Association. He is currently into a second term as vice-president of the Commonwealth Pharmaceutical Association, fulfilling what he sees as a duty of those fortunate to work in more privileged nations.

"I feel very, very lucky to be in this country," he says, "even luckier to be educated and luckier



Hemant Patel was born in India, raised in Uganda and has come into his own in Britain

still to be a healthcare professional with a job for life. So I have a compelling need to do something for society in general, both here and abroad."

Born in India and raised in Uganda, Hemant Patel might have been considerably less lucky had his father not had the foresight to quit the country in the 1960s, a few years before Idi Amin seized power and embarked on his well documented reign of terror.

"My father looked abroad to see how he could provide security for the family," says Mr Patel. "My sister and I were crazy about The Beatles, so we pushed him towards Britain, where we joined him three years later, 10 days before the first moon landing in 1969."

The teenage Hemant Patel toyed with the idea of a career in pure science, but his father thought pharmacy offered a more secure future. "When you have crossed three continents, you want to establish roots, settle to something solid and keep your head down!"

Mr Patel responded by becoming a successful businessman, at one stage owning three pharmacies with a turnover of £1.3m. But business alone was never going to satisfy his yearning to make a difference.

"Pharmacy has given me a lot," he reflects, "and I believe it is the duty of every pharmacist to make sure that what they have inherited is handed back to the next generation in a better state than they found it. I want to make sure that the next generation of pharmacists has a strong future, with work that is serving society but at the same time is enjoyable and professionally challenging."

He prides himself on being the architect of the Council's current "vision" — that Britain should be the safest place in the world to receive medicines — and looks forward to working

## THE ANGER HAS GONE BUT THE PASSION REMAINS

with the Council to translate that vision into reality. He also credits himself with raising the profile of the pharmaceutical profession: developing more clinically oriented models of practice, including a pharmacy-based model for the diagnosis and treatment of osteoporosis that made it on to prime-time BBC TV news; helping to develop the first large-scale community pharmacy-based medicines management project (in Barking and Havering); and highlighting public health as an important area for pharmacy to develop.

The main challenges that Mr Patel believes the profession and the Society are now facing are outlined in the Panel.

Top of Hemant Patel's list of priorities when he gives up the presidency is to spend more time with his wife and two young adult children "because I've missed them quite a bit in the past three years". He will also have more time to support his local football (West Ham) and cricket (Essex) teams, as well as chairing a benefit for the young Middlesex cricketer, Owaish Shah, who is a friend. The one thing he won't be doing is thinking about retirement. "I'm still in my early 50s and see myself working until past 70," he says.

"I am still passionate about pharmacy and have a lot to offer in this exciting and challenging time of change."

*Hemant Patel was interviewed by Isabel Walker, freelance journalist*

## MAIN CHALLENGES

**For the profession: to achieve unity rather than fragmentation, to embrace the opportunities of IT, to find ways to contribute to the single needs assessment process and to have its expertise valued appropriately by government. ("In 10 years," Hemant Patel points out, "we have had 15 ministers responsible for pharmacy, none of whom have managed to do what is actually needed. We need a new contract that recognises our cognitive role as health care experts.")**

**For the Society: to maintain a viable and effective professional body after the Government hands over the regulatory role to a new General Pharmaceutical Council in 2010. (And he admits that this has caused him more sleepless nights than anything before.)**

## COMMUNICATIONS

# Spin pharmacists or spin doctors?

Members sometimes ask what the media relations and public affairs functions in the Society actually are. Are we “spin pharmacists” rather than spin doctors? In simple terms, what we do is positively influence the opinions of the media and governments about the role of pharmacy.

The public relations team deals with both reactive and proactive media coverage. We run campaigns to highlight the positive aspects of pharmacy such as the launch this month of the internet pharmacy logo. Major campaigns target the national and regional media. We also respond to stories about pharmacy or medicines such as the availability of emergency hormonal contraception.

The public affairs work targets governments at Westminster and Europe, and in Wales and Scotland. There are many aspects of government policy and legislation which will affect the activity of the Society and pharmacy in general in 2008. The publication of the pharmacy White Paper for England early in 2008, for instance, will impact on how pharmacy services are developed to help enable pharmacy to deliver its potential as an integrated profession. In Scotland, the “Better health, better care” action plan, published in December 2007, will deliver innovative and ambitious improvements to primary care, including walk-in access to a range of services via community pharmacies.

The Health and Social Care Bill will become an Act in 2008, paving the way for regulatory responsibility to be passed from the Society to the General Pharmaceutical Council, and marking the beginning of the demerger of the Society.

We expect the introduction of the “responsible pharmacist” and, later, new requirements for supervision to have implications for the Society and pharmacists across Britain, fundamentally changing the way pharmacists practise — enabling them to take on more clinical roles and enable better use of the pharmacy workforce.

The Scottish Government will introduce measures to abolish prescription charges, initiate

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elections for health board members and update health legislation. The Society will be working with MSPs and civil servants to assess the implications for pharmacy and ensure that the views of the profession are heard and understood.

We work with several public affairs agencies to provide tailored advice and activities to meet the specific needs of the different governments. We communicate with opinion formers about issues and topics where we want to inform or persuade. This is done through briefings, meetings, publications, events and also attendance at party conferences.

There are also occasions when pharmacy organisations speak as one voice and work together, for example the highly successful pseudoephedrine campaign which resulted in the products remaining available over the counter.

We plan to increase our member-focused activity. The Society is improving engagement with members through myRPSGB and also through *Your Society*. The three national pharmacy boards also publish quarterly newsletters for members highlighting issues and events that are important to each country.

The Society facilitates the network of over 130 branches and regions which provide support for pharmacists locally. As well as having a social element, branches provide a focus for professional and educational meetings covering a range of topics, including professional, clinical, practice and scientific matters, current affairs and continuing professional development. During 2007, more than 600 meetings were held.

Towards the end of 2007, the branch network played an important part in the roll-out of the Pharmacy 2020 consultation. A 21-strong team of Pharmacy 2020 champions was recruited and trained to engage with the branches in order to gather ideas that will help create a vision for the pharmacy profession for the next 10 to 15 years.



Deborah Oliver is interim director of public affairs and communications. She describes the ways the Society seeks to reach out to members and to influence the movers and shakers in politics

Our investment in better communication with members continues with our commitment to the next Open Day on 13 April 2008. These types of activity are really geared towards increasing the interaction between the Society and members and we hope these events will continue to develop the understanding of Society activities and help us remain member-focused.

Deborah Oliver

## BPC LATEST

In 2007 news from the British Pharmaceutical Conference reached an audience of over 24 million people. In 2008 the BPC will open on a Sunday with a very special delegate rate of £25 available to members attending on this day. For details visit [www.bpc2008.org](http://www.bpc2008.org).

## SERVICES FOR MEMBERS

# A library fit for the 21st century

Pharmacists will soon be just a click or so away from access to more than 1,000 international journals online. They will be able to log on from their pharmacy or home computer to a journal database that is being sourced by library staff at the Society. The resource, expected to be launched this year, is the latest initiative at the library, which has grown over the past 166 years from its original eclectic collection of books donated by well wishers. Now the library, based in the headquarters of the Society in London, has more than 80,000 books and offers pharmacists from across the different sectors of practice a single point of access to most of the information they are likely to need at any stage of their professional lives. Head of information Roy Allcorn says: "We have such a comprehensive resource, probably the best in the UK. We specialise in having the right information — and providing it at the right time."

Nearly 1,000 pharmacists came to the Society's headquarters to use the library services last year. The library collection covers a wide range of subjects from pharmacy practice, pharmacology and pharmacokinetics to books about drug development, dosage and delivery. There are also shelves devoted to the history of pharmacy and volumes, more than 100 years old, on herbal medicines and medical botany. The oldest book in the collection, written in Latin for apothecaries of the time, gives advice about the medicinal benefits of herbs and dates



Roy Allcorn, head of information, wants the library to match members' needs

### LIBRARY HOURS

**The library is open for members on weekdays from 9am to 5pm and from 10am to 7pm on Thursdays. Pharmacists can also view what is in the collection via its online catalogue and can request and renew items 24 hours a day. The library aims to send out a book the same day the request is made. The service is free to members although they do have to pay return postage. The library can be contacted by telephone on 020 7572 2300 and by e-mail at [library@rpsgb.org](mailto:library@rpsgb.org).**

back to the 15th century. Mr Allcorn says: "The library is as old as the Society itself and it originally had a key teaching role to support pharmacists. The whole basis of the organisation was to offer professional support — it's a role which we in the library still fulfil today."

Last year the web-based catalogue received more than 9,000 hits from library users. Library staff can also access the collections of the British Library and the library of the British Medical Association on behalf of members as part of an inter-library loan service.

Although the book collection is a core part of the library services, it is only one element of the professional support which the department can offer. The library subscribes to more than 250 print journals and holds another 1,000 titles which are closed sets — publications that are no longer in print or circulation. Access to more than 60 journals is also available online. Library members can phone or e-mail the library to request a copy of a journal article which can be sent as a pdf document via e-mail. It is also possible to post or fax a hard copy of the article. Library users are charged a supply fee whether the article is sent via e-mail or as a hard copy in the post. The same document supply service can provide extract of books where complete or partial chapters are requested. Mr Allcorn states: "Our message to members is that we can get you the information you need when you need it." Details on a service development that will allow members direct remote access to around 1,000 full text journals are expected to be completed early next year. Mr Allcorn says: "We are near to arranging remote access to a package of full text and bibliographic resources — both scientific and practice-based — that they will be able to access regardless of where they are. In this way they will have available information of

the same authority and quality as available in print form from the library."

The four library staff are also available to carry out literature searches and will respond to any requests for information and will advise callers on the use of other web sites or organisations where appropriate. Members of staff have also compiled fact sheets on the common themes of medicine use reviews, continuing professional development, and continuing education. The staff work closely with the team of information pharmacists who respond to clinical queries from members.

Most library users, according to Mr Allcorn, come from the community sector. He points out: "People working in NHS hospitals traditionally have access to more resources than those working in the community — we are trying to meet the resource needs of that group." But its resources will become even more relevant to all sectors of the profession when mandatory continuing professional development is introduced in the future, he believes. "When CPD becomes mandatory, pharmacists will need to find information to further their professional development. We have that information and we are now ready to support pharmacists in a form that suits their needs. We do have a significant depth of expertise in sourcing information and providing it to match those needs."

*Roy Allcorn was interviewed by Debbie Andalo, freelance journalist*



Librarians (left to right) Karen Poole, Sarah Butler and Deborah Leem

## SPOTLIGHT ON MEMBERS

# What has the Society done for me?

“Many of my colleagues see the Royal Pharmaceutical Society as a regulator and not much else, but I think that’s because they are not aware of the many ways in which it works to support and develop the profession.

It is true that a lot of this activity doesn’t affect members in their daily lives, but some of the work the Society has in train today could have a huge impact in a few years’ time.

Take the Pharmacy 2020 project, for example. Its aim is to set a direction for pharmacy for the next 10 to 20 years and members’ views are being gathered with a view to developing a forward strategy.

The last time the Society asked pharmacists what they wanted to be doing in future many people mentioned prescribing, and now here we are prescribing independently, with full access to the BNF. The Society listened to what pharmacists said and then developed a vision that was subsequently included in all health plans, including the NHS plan of 2000.

I have been involved with the Society since my student days. In my final year at Aston University in 2005, I was president of the British Pharmaceutical Students’ Association, the Society’s official student organisation.

### Bridge-building

I was particularly involved in bridge-building between the BPSA and the Society, trying to make sure that the student voice was heard in the Society and working with the Society’s membership department to spread its messages to students.

That year the Society launched a root and branch review of pharmacy education, and I was involved in scoping students’ views. My particular concern was to incorporate appropriate levels of “soft skills” — like business, management and influencing skills — into education for the benefit of the profession as a



James Wood has been involved with the Society since his student days and does not expect, as his role in community pharmacy develops, for that to diminish

## AS A COMMUNITY PHARMACIST I RECEIVE CONSIDERABLE SUPPORT FROM THE SOCIETY WITH MY PROFESSIONAL PRACTICE

whole as well as individual pharmacists.

I am now a community pharmacist and director of Associated Chemists in Sheffield. This is a consortium of local pharmacists who own a pharmacy and mobility business. The company was set up in 1951, when 45 independent pharmacists in Sheffield joined together to provide a late-night service for local people. Associated Chemists, which opened the following year, was the first consortium-owned pharmacy. It has been open every day since then.

As a community pharmacist, I receive considerable support from the Society with my professional practice. For example, recently the membership team distributed a really useful tool-kit that pharmacists could use during lung cancer awareness month to communicate via the media all the

work we were doing with lung cancer in particular and public health in general.

### Branch secretary

I am also involved with the Society’s branch and regional network as branch secretary for Huddersfield, which is currently leading on a CPD programme, resourced by the Society.

The great strength of this network is that it brings together diverse groups of people from across the profession. At a branch meeting you can meet people working in the community, hospital, industry and academia, all keen to work with and learn from each other.

The Society does a lot to support the committees, not just with events and CPD but also offering training opportunities — such as in working with media.

A lot of the Society’s national work is at a high strategic level and pharmacists are often not aware of it, which may be one reason why some people resented the recent increase in membership fees.

The work the Society does to promote pharmacy as a profession both to other professionals and to decision-makers in government — for example via the Lord Darzi review of the NHS — is very important. It is vital to raise awareness about what pharmacists can achieve, such as in our growing public health role.

### Greater clinical role

Consultation on the Pharmacy 2020 project is happening now. Personally I am hoping for a greater clinical role for pharmacists, with delegation of technical jobs. I would like to see a growth in prescribing and an increased role in public health, with wide-ranging clinics, advice services and diagnostic testing. Plus I am looking for more joined up work with the health service, with access to patients’ records.

Last year the Society created national pharmacy boards, and these could really help to improve its image with members because they will actually affect our everyday work. For example, the English Pharmacy Board is talking about introducing national accreditation for community pharmacists providing local enhanced services, such as hormonal contraception for teenagers. Quite a lot of these pharmacists work as locums, so this would mean their work was not affected by travel between different PCT areas.

I plan to stay in community pharmacy and embrace some of our new roles. My big interest is in developing our public health role and enhancing other professionals’ understanding of pharmacy. And for that reason I am sure that I will be more rather than less involved with the Society in future.”

*James Wood was talking to Isabel Walker, freelance journalist*

## VIEW FROM THE BRANCHES

# We're passionate about pharmacy

Although it looks as if the introduction of mandatory continuing professional development will be delayed beyond the end of this year, it will be better to get used to doing it, sooner or later. And members anxious about CPD can have some of that fear taken away by becoming involved in their local Society branch. An opportunity to offer shared education and learning is at the heart of what a modern branch expects to provide for its members. Branch meetings are also the perfect place to network and share ideas with other pharmacists who may come from different sectors but work in the same district, as *Your Society* discovered when it spoke to two young branch secretaries.

### Focus on education

Gautam Paul, who has been secretary of the 1,000-member Birmingham and District branch since May last year says: "Branch meetings are a means of facilitating CPD. They give people an opportunity to access education and to know that there is a forum for education and learning." Beverley Stevens, who helps run the smaller, 320-member Cheltenham and Gloucester branch, says their meetings also have the same education focus. She adds: "They aren't political. They are about getting people involved, in getting together and doing CPD. The Society now has an online CPD record for members and while at the moment CPD is being recommended it isn't being policed. Our meetings give members the chance to say 'I am going to this education meeting

and I can write it up as part of my CPD'. I think another way we help is by choosing the subject because sometimes people don't know what to write about."

During the past year Birmingham members have discussed adverse drug reactions and depression, and have put forward their views on what they believe the role of the pharmacist should be in 2020. In Cheltenham and Gloucester members have looked at the problems of infection and what it means to have diabetes. The subject of the meetings are agreed by the branch committee and are aimed to attract the widest audience. Mr Paul, whose branch meets up to nine times a year, says: "My hospital background means that I may not have a massive insight into community pharmacy but our committee is made up of academic pharmacists, pharmacists from primary care trusts and the community and we all have an input. I think we strike a good balance in terms of what we offer."

The committee in Cheltenham and Gloucester decided to send a questionnaire to all its members in order to find out what topics they were interested in before agreeing the list of speakers to invite to their five annual meetings. "We go for topics which are 'hot' and in fashion — like infections — or other issues which they haven't studied for a long time," explains Miss Stevens.

Despite the difference in the size of membership, both branch secretaries say a turn out of 40 to 50 members is a "good" meeting. Usually there are marginally more members from the community than other sectors but there is an equal number of men and women

and a cross section of ages. The key role of the branch secretary is to organise the meetings, which includes booking the venue and trying to encourage as many members as possible to attend. The offer of a pre-meeting buffet can act as an incentive to some members, according to Miss Stevens. Holding the meeting in a central venue — with easy parking — is also important. In 2008 Mr

Paul plans to encourage invited speakers to produce an educational handout to be circulated at the end of the meeting. This could be a case study which reflects the topic of the evening, he suggests. "I like meetings to be interactive and if they have a case study about a diabetic patient, for example, it is something which members can work through afterwards and put towards their reflective practice."



Gautam Paul looks after 1,000 members in the Birmingham and district branch

Prestige Photography

IF I GET 40 PEOPLE AT A BRANCH MEETING WHICH IS REALLY INFORMATIVE THEN FOR ME THAT BRINGS PERSONAL SATISFACTION



Anthony Thompson Photography (ATP) Ltd

**Beverly Stevens believes that part of her role as branch secretary of Cheltenham and Gloucester is being the public face of the Society**

Both Miss Stevens and Mr Paul rely on e-mail to contact members. But Mr Paul also has to post written details of meetings and events to around 400 members who are not available

online. The use of e-mail has made communicating with members faster and more efficient, according to Miss Stevens. "It means I can reach a lot more people and it doesn't take long. At the beginning

## CONTACT THE MEMBERSHIP TEAM

The membership team at the Royal Pharmaceutical Society supports branches and regions with the administration and day-to-day running of local activity. Contact details of branch and regional secretaries and details of forthcoming local meetings can be found in the branches and regions pages of the Society's website at [www.rpsgb.org](http://www.rpsgb.org). The membership team can be contacted by telephone on 020 7572 2331 or by e-mailing [b&ra@rpsgb.org](mailto:b&ra@rpsgb.org).

of each year I send out a flyer to every member with all the meetings listed on it along with my e-mail address so that people can keep that information for the whole year. I try and make my e-mails as friendly as possible to encourage people to get involved. I suggest that they don't have to do things, but that it would be a good idea if they did."

Although education and learning together may be at the heart of what a good branch can offer, it also provides other opportunities for members that can be just as important. Miss Stevens believes she can be the public face of the Society in her locality which can be a help to members. She says: "If people don't know who to direct an issue to at the Society then they see me as somebody who knows about the organisation. It's not my main role as branch secretary, but I am quite happy for people to contact me and in fact I expect it."

She says: "I also think it's important [for the Society] to have somebody who is in contact with the profession and the way that pharmacy works in the area. A lot of people see the Society as some faceless body, and I think having a branch network is important because people can put a face to who they are talking to."

Mr Paul believes that the branch can also act as a sounding board for local members that can be valuable and help make sure that the voice of the profession is heard. He is already working

towards having major pharmacy consultation documents published on his branch's web site so that members can put forward their comments if they wish. Mr Paul says: "I think if there is a cause to be consulted about that members should know about it."

### Getting people involved

Both Mr Paul and Miss Stevens were keen to become branch secretaries because both had previously had significant roles with the British Pharmaceutical Students' Association — Mr Paul is a past president and Miss Stevens used to be secretary general — and both wanted the chance to continue to support the profession once they graduated. Miss Stevens says: "There is apathy in the profession. Some people don't want to get involved and that is what I am doing — trying to get people involved. If I get 40 people at a branch meeting which is really informative then for me that brings personal satisfaction." Mr Paul says being branch secretary gives him the perfect opportunity to share and promote his passion for the profession. "It's the kind of person I am — I am passionate about the profession and the role that it has and I thought the branch would be a good way to channel my energy. I think if you are going to have a career in pharmacy then you should feel that passion about it."

*Interviews conducted by Debbie Andalo, freelance journalist*