

Transcript of the Public session of the Council meeting held on Tuesday 1 April 2009 at 36 York Place, Edinburgh

[NB: Decisions in square brackets and narrow type are taken from the unconfirmed minutes of Council and therefore are subject to amendment]

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PUBLIC BUSINESS

Present

President	Mr S Churton
Vice-President	Mr M Astbury
Treasurer	Mr A Gush
Mr S Acres	Ms S Agha
Mr G Alexander	Mrs M Allan
Mrs K Blair	Mrs C Brown
Mr D Carter	Dr B Curwain
Mrs D Drury	Dr C Duggan
Dr P Entwistle	Mr J Gentle
Mrs S Hikins	Mrs L Jacobs
Mr R Jobling	Mr J Jolley
Mr A Kershaw	Mrs S Kilby
Ms A Moore	Ms M Saunders
Mr D Simpson	Mr D Thomson
Professor K Wilson	

In attendance

Mrs B Taylor, Chairman of the English Pharmacy Board. Mrs S Melville, Chairman of the Scottish Pharmacy Board and Mr P Jones, Vice-Chairman of the Welsh Pharmacy Board

Mr J Holmes, Chief Executive & Registrar

Apologies for absence

Professor B Michell, Professor N Barber, Miss Y Liddell and Ms J Ramsey

The President, Mr Steve Churton: Good morning, colleagues. We have a fair amount to get through, but I think we are on track. Gavin Perkins, you are here as a guest today. We have apologies from Jane Ramsey, Bob Michell, Nick Barber and Yvonne Liddell.

We agreed yesterday we would start with item 12, paper 35, the Committee Review.

12. Committee Review

Mrs Alison Moore: I need to formally put my thanks on the records for the members of staff who have helped me in preparing this. I have had significant help from the Secretariat, from Martyn, Angela and Cath Savage, who have helped me significantly in putting this together.

Because I know you have all seen the paper, not just today but in advance of our last Committee session, where unfortunately we did not get the chance to talk to it, but it has not changed substantially since then.

I am not planning on taking you through it page by page, and going through each recommendation individually. I thought I would run through it generally, describe how I have set it out and then, if people raise issues on a sort of exceptional basis, rather than run through the whole document, I thought it would be the easiest way of doing it.

Basically I have split the paper into two halves. I was asked to look at the Council Committees and working groups and also membership special interest groups. The two seemed to fall naturally into two halves, so the paper is set out in that way. There are general recommendations and specific recommendations relating to the Council Committee working groups. There is then another section with general recommendations and specific ones, relating to the general and special interest groups. In terms of the Council Committees and working groups, most of the changes I have suggested are to the ways in which we work rather than structural changes. There is the odd recommendation where I have suggested that we maybe look at a different way of managing the Committees themselves. But in general it seemed to me that the best thing to do was to look at a different way of working, and to work more virtually, where possible and practicable, to enable us to have virtual meetings, perhaps facilitated more easily than they currently are.

In terms of the specific things to look at, recommendation (v) on page, that I will highlight is one you need to remember your agreeing to. The RMC proposed that attendance fees are payable to Council members attending tele or videoconference, scheduled committee meeting, and that the amount of attendance fee payable be set by the Chairman at the end of the meeting. That is the recommendation that came from RMC, when I asked them to consider whether it was practicable or not.

Also if you could note on page 4 at (iii), there are certain changes to the standing orders that would be necessary to enable that to happen, and for us to have virtual meetings where appropriate.

In terms of the second half of the paper, looking at membership and special interest groups, I think the thing that struck me most was the need to have good membership services and a good way of enabling members in all sectors to communicate with each other and feel supported by the Society and feel part of it. If we could find a way of doing that, whilst removing some of the bureaucracy surrounding the current methodology we have in doing that would be preferable to what we have at the moment. Therefore, the suggestion that is outlined in that half of the paper, about how we can look at gradually, over the next 9 to 12 months, changing the systems that we have so that the membership supports services, in terms of peer support, are managed in a different way to the way they are just now. That is the aim behind the second half of the paper. If you want to discuss specific recommendations, that would be welcomed. It is not about disbanding what we have currently, but finding a fresher, newer way of being able to support members and taking away some of the bureaucracy and the voting and the side of things that perhaps does not enable us to be as flexible as we would like to be. That is all I want to say now, but obviously I am happy to go through any queries of issues people have got.

Mrs Sylvia Hikins: I want to say something on special interest groups and also around teleconferencing. I am not a Luddite, but I think I can see problems with it. It sounds wonderful on paper. I think it is great as part of a programme with other things, but the two issues around telecoms is have we all got the technology? I work at home and do not have teleconferencing facilities. Are you going to provide them for me at the RPS expense, because I am not going out to buy them for the odd teleconference or whatever. There are issues around availability and compatibility of technology, training people to use it properly and to ensure people are trained, so they know you need a Chair and you need to have them properly minuted and so on. That was my first point about teleconferencing. Let us not crash into it. Let us think and cost it out properly and see what is required in order to make it happen in a very fruitful and meaningful way. I personally think there is a reason why we need to touch and smell each other. We do not have to do it all the time, but we need to at certain points of the year to know we are still there. That is part of being human, and that is part of communications and getting decisions made.

A second point is around special interest groups. I would not want us to adopt the recommendations around special interest groups in this paper today. I would like us to have another think about them. This has come from a meeting of the Industrial Pharmacist Group in Lambeth. John was there. If he thinks I am not reporting it correctly, please say so, John. The feeling amongst the industrial pharmacists was that if we reduce -- because they saw it as a reduction -- special interest groups, or certainly industrial pharmacy group, to a meeting at BPC and teleconferencing that we would lose them.

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There were some feelings of dissent around we have never known what budget we have had. The IPG run various conferences. They are not huge money-makers, but they make money. The person who organises organisations those knows what the break-even point is in getting people to conferences. She knew that all of the IPG conferences exceeded that, but it has not succeeded in finding out how much money was made. The feeling was: why not -- and I think this would be very helpful in moving into a new professional body -- think about giving special interest groups a budget? They are all big, grown-up people in the wide world out there. Let the Chairs and the Committees manage the budget. Obviously they would have to have some arrangement with Finance, so they can keep online and know when they are spending it. Let them have their own budget and organise how they want to meet. If they want to teleconference all year, great. IPG actually does do some of that and there is an awful lot of online emailing, and so on. Give them budgets. Let them be managed by the special interest groups. If they need to meet every month and need money for it. They must generate that and that must be clear. So, for example, IPG that generates income should go back into the pot and let them decide how they are going to run. We also need to improve information about potential members of special interest group. that also has been a problem. I have been on IPG for three and a bit years, and they have always been asking for more information and links into members with an industrial interest. I am suggesting that we do not make a decision about the special interest groups, but that we refer it to the Officers or someone else to have a think about my proposal. Because I think that is probably quite a good way of working, moving forward into the professional body.

The other quick point is that IPG pointed out the suggestion is to have them working through the English Pharmacy Board and industrial pharmacy is UK-wide. So that will be another problem, not just with IPG but with other groups that are UK-wide.

The President: I know a meeting has been organised for 14 April with all the Chairs of the Special Interest Groups, with Jeremy and Alison, where those conversations could be had and will be had.

The Treasurer, Mr Andrew Gush: On the subject of teleconferencing, there would be no additional cost to Council members at all. All you need to have is the number to dial into the call and you can use your ordinary telephone. It will be the cost of the call, that is all.

Mrs Sylvia Hikins: So it is not visual contact, just phone.

Mrs Sue Kilby: As you would expect, I have a number of comments. First around Education, being Chair of Education. I would very much welcome having the opportunity of having a member of staff to lead on some of the professional aspects of education, something I have flagged up to you, Jeremby, a year ago when I became Chair of Education. I believe we have now appointed somebody. I guess they will start very shortly. Have they started today, if they are based here in Scotland. So there will be somebody now to lead and develop the work internally within the Society around the professional aspects.

The other issue is that Education Committee is slightly different to the other committees that are considered in here, because it is actually a statutory committee. The work will change when we separate. There will be some sort of Committee within the regulator, looking at regulatory aspects of education. There may be another group within the professional body looking at the professional aspects. Education Committee has a very heavy workload. For example, at the next committee meeting we have 11 accreditation reports to look at and prepare. We also have a lot of other issues we need to consider, things like something general conduct (?) for example. I am more than happy to take the professional aspects into that Committee, and have spoken both to Jeremy and Steven in past about this, before this work was commissioned. But we do need to be aware that the Committee may have to be extended, and we do need to think how that is actually going to be managed as such, because of the workload. That was one area we have to get over.

I also have particular concerns about reducing the number of committees and groups at this particular time for the Society for two reasons. One, I look at the new professional body and what I want to do is try and engage with as many members as possible and the widest range as possible as well. I do not necessarily want the same people coming in to sit on meetings all the time, but just to extend and involve more of our members. I am concerned that if we are seen to be cutting meetings, we are actually putting up the walls or pulling up the drawbridge and reducing access to the members at the very point in time when we are trying to build bridges with our members. I also see that things like special interest groups

have a value and a benefit because they actually develop people to move on to their higher level more political roles as well within the profession. For people that have come straight on to Council who have not had any of these positions in the past is a big big jump, to come in straight from community pharmacy and suddenly be expected to take a place on Council. I know things going forward with the Boards is going to be slightly different, but we still need to develop and support people going forward before expecting them to take on these roles. So that is something else you need think about: What is the purpose of some of these meetings?

Thirdly, as far as IPG is concerned, there is an error which I would like to clear up on page 11, which talks about of "some groups are categorised by type of employer (industrial, hospital). I am not sure what you mean by categorising the type of employer, because the type of the employer in industry is actually very wide. It could be a university, the MHRA, a large global blue chip or a small company such as a special. It could be a consultancy, and that is a growing area for pharmacists. There are more and more pharmacists either in small consultancies like myself or in global international consultancies. There is a whole range employment type. You could be an employee, an employer or a director. There is a range of types of employment in there. I would not like it to be categorised purely as industry and looked at purely and simply as people working in GSK and Pfizer. It covers the whole range. Because it covers a whole range and a diverse range of roles within industry, often pharmacists are working alone in isolation. I may be working next to somebody like John who I did not even know was a pharmacist, because we did not have to state, as far as our jobs, that we are a pharmacist. That is why it is very important to have a group that they can actually relate to as far as industry is concerned, to consider all the issues like CPD, or the professional issues. And I am not sure that this paper has pooled a number of these issues. With that, I will be quiet.

Mr Gerald Alexander: in relation to what you said previously, you said there was to be meeting on 14 April to discuss this, after Sylvia spoke. Looking at the recommendations -- it is a point of order -- the meeting will be convened on 14 April to discuss the implementation following the recommendation following the Council adopting those recommendations." In effect, meeting with the special interest groups following Council adopting recommendations. We have not quite done that. Is the meeting going to be a consultative meeting with those special interest groups following our discussion here, or is it to implement the recommendations that we come to, because Sylvia specifically asked this Council to leave those recommendations on the table, in which case that could be a very productive meeting you would be involved in by meeting SIG on 14 April. Be very careful about adopting the whole of this report. There are many good things in it, but objectively Sylvia has picked on reasonable suggestions and I think Council needs to decided on her proposal.

The President: That is absolutely fine, Gerald. That is why Alison constructed the paper in the two parts that she did, in terms of committees and special interest groups. If that is the conclusion Council comes to, that is fine. Can I ask Jeremy to comment on the purpose of the SIG meeting.

Chief Executive & Registrar, Mr Jeremy Holmes: Alison has been in touch with each of the SIG chairs, and they know the line of thinking, but we have not had a face-to-face meeting with all of them round the table, and I think it would be very productive to have that meeting. And there may be practical measures we can take to implement these recommendations such as fixed budgets which, if we can agree those on 14 April, would make this a workable plan. Alison, do you want to add to that?

Mrs Alison Moore: Only that the intention of the meeting on 14 April is to discuss whatever it is that Council agrees. If Council agrees to adopt the paper as is, then the intention will be to discuss how to implement that. If the Council does not agree to adopt the paper, or have particular changes or there are certain parts you want to put one aside to discuss later, if appropriate, we can take that to the meeting on the 14th. It has not got a fixed agenda. It is dependent on the outcome of today.

Mr Gerald Alexander: The point I am making is that Sylvia in effect has made a proposal to leave those recommendations on the table for further consideration. Obviously if we do that, we can then look at the rest of the paper.

The President: Absolutely. I will get to that point, but I want to hear more views first, which was why I asked the question. It was not clear, Sue, whether you were suggesting that, like Sylvia, the paper dealing with the SIG points caused you some concern, but you were content with the other part of the paper.

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Mrs Sue Kilby: I am content, as far as education is concerned, provided I have the resources to enable me to take this, and on the understanding that the cost of the Committees may be increased.

The President: Okay, but in terms of the SIG issues, are you of the same mind as Sylvia?

Mrs Sue Kilby: I have extreme reservations about agreeing, as far as industry is concerned, according to this.

The President: So you do have some concerns.

Mrs Sue Kilby: I would go with Sylvia's recommendation that we have the SIG meeting, that we have feedback from the SIG meeting and that we then consider it at the next Council meeting.

The Treasurer: Can I make a brief comment, just to ask colleagues when they make an analysis of the paper, do it in the context of an organisation which is heading towards de-merger, which will have a substantially reduced turnover, and so needs to actually streamline its infrastructure costs.

Mrs Sue Kilby: Can I come back on this? There is a heavy subsidy by certain members of the IPG, as far as the actual meeting is concerned.

The Treasurer: I was not talking of the IPG. I said in the context of the whole paper. When you make an analysis of the whole paper, do it from the context of an organisation -- --

Mrs Sue Kilby: There is also the other issues of all the other special interest groups, the clinical groups and how they are going to be managed going forward as well. I am actually not clear whether they are in or out of the new professional body. Clearly their interests will have to be considered as well going forward. This is only part of the answer at this present point in time.

Mrs Dorothy Drury: I would like to thank Alison, because I think it is an excellent paper. I would like to reassure Sylvia, because I am on the Veterinary Committee, and we had a teleconference. I was bit sceptical, but it was really easy and everybody got a chance to speak. I think this is a very important topic about the special interest groups. I do not know whether Alison knows this, but because people are working cross-sectors, are we to encourage people to join more than one special interest group?

Mrs Alison Moore: That was certainly my intention. But also, I think there has been a misinterpretation, which I tried to talk through at the beginning. This is not about disbanding the current structure that we have, but about trying to disband some of the bureaucracy r about the membership groups we have got, while still enabling members of those groups to communicate with each other. If there is a better way of doing it than outlined, the plan would be to work through that over the next 9 to 12 months with those groups anyway. This is not about saying, "Let's stop the IPG from meeting. This is about let us work through with other committees how best we can do it. Council can choose not to go with that, and that is fine. But I do not want anyone to think that this is about disbanding membership of special interest groups, because it is not. The other thought behind this is that if we have a way of managing these groups that is slightly less bureaucratic than the one we have at the moment, we would be enabled maybe to have more membership groups run in different ways. Members could joint whichever one they choose. They could set up their own and it could be a lot more flexible. This is about how do we get ourselves from where we are now to where we would like to be in the new professional body.

Chief Executive & Registrar: Can I reinforce the point Alison has made? This is not about disbanding groups. It is about dismantling some of the bureaucracy around those groups and streamlining the infrastructure, so that it becomes affordable in the new demerged world. I should point out that the groups referred to here are not the groups themselves, but they are the committees for the groups. So although it mentions committee in one or two cases, Community Pharmacy Group, we are talking of streamlining the committee structures; not trying to dismantle the groups themselves.

Mr Douglas Simpson: This is the sort of thing that made the Society unpopular in the past. We have a meeting due one 14 April. It is only common sense, it seems to me, to wait until that particular meeting has taken place to take this matter further. I regard this paper, especially on the special interest groups and membership groups, as work in progress. I think the Veterinary Group was the first one to be set up,

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because the Council just was not able to handle the specialist issues involved, which is why they were set up. The same for the Industrial Group. They have a long and noble history. They are very valuable bodies. I think we should try our very best to continue these groups into the demerger, because they are our natural supporters of members of them. We should not make waves or create problems that might indicate that somehow or other these groups are under threat. It really should be for the governing body after demerger to make final decisions about what should happen to these things.

And I would say remember the Iraqi Army; be careful what you do. You did talk about disbanding, the groups were set and you are talking about the management of them you are talking about.

I am glad you have made that clear, because it is an important point. I think we should wait until we have had the meeting with the Chairs to decide what to do about SIGs and the membership groups.

Dr Phillida Entwistle: Can I go back to bit about the committees, and note your comments under page 5, under bullet points 5 and 7? Up to now, we have always appointed these working groups and committees by asking for special interest from members of Council. It seems to me that the Council reporting committees would be the most sensible way to proceed for both membership and chairmanship. If you want to change it for the ones that report to Council committees, that is slightly different. But I think it will delay it, if you put in this extra bit about the Chairman of the Committee appointing the members.

I am conscious of the fact that one or two reduce the number of working groups that maybe in the next 12 months, and maybe this will not arise. On point 5, there could be a problem with the APS, because 50 percents of their meetings are now done by teleconferencing. The Chairman is an external guy who does not understand about the finances of the Society, and it would not be possible for him to be to judgment on the fee that could be charged by Council attendees on the day. So I think you would have to make an exception for that.

Mr John Jolley: I wish to talk about tabling this particular paper, because I feel there are essential issues here which do not meet the future objectives of this Society. As regards some of the standing committees, I would have liked to have seen more positive comments about the effective working of these committees. Many of these committees meet for long hours without reaching any conclusive objectives, and what objectives are identified are rarely met. With specific regard to the special interest groups, I think we are looking to see that the brunt of the cuts, which will inevitably be necessary, as Andrew says quite correctly, we are going to be very much tied to any future budgets, because the big question will remain. We will only be able to afford what members will opt to join the new professional body. Because with those members will come a membership fee. So in the totality of the new professional body, all the committees are going to be limited by the fees that we are going to be able to get, National Boards included. This paper totally disregards all of the outcomes from Trans Com. Many people have put a considerable amount of time and effort into making recommendations as to how this Society can engage with the total profession. What we are doing in this paper is shutting down those lines of communication. I am glad for the clarification or the correction of the term disbandment, which has been used quite frequently with regards to special interest groups. The Carter Report requires us to engage with the totality of the profession. If this paper goes through, that will just not happen. The timing of this paper is most unfortunate, because what you are proposing, I understand, is that you are going to go with a fait accompli to the Chairs of the various special interest groups, and particularly the Chair of industrial pharmacy, with a proposal that the IPG be disbanded and a virtual group be established. This is going to be five days before the Special General Meeting. I think you will get certainly a lot of comment, if this Council passes this paper at that Special General Meeting. I take issue with regard to the clarification of the employment type, because again, it totally disregards the skills and competencies of pharmacists working within industry. It is totally different from community practice. And until this Society recognises that fact, they stand no chance whatsoever of engaging with people within this particular profession. The suggestion that "Oh, maybe they could have one meeting a year at the BPC where -- oh yes! -- if you want to attend the industry meeting, you will have to pay the daily rate for attending the conference." Are we really wanting to put an additional levy for people to partake in the new professional body? In conclusion, I say if this paper is passed, Bill Scott's prediction about the dying embers of the Society last night will certainly come to fruition.

Mrs Lorna Jacobs: I wanted to comment on the teleconferencing highlighted in point 2 on page 4.15 ... **(Inaudible)** I think that is a very important point, so the Chairs can feel confident of which meetings should be going to teleconference, what are the type of things they should be looking for and which would be addressed more appropriately by face-to-face meetings. On the same topic, Chairs should be given training to ensure that when you are teleconferencing, you get the most from that type of meeting,

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because it is a different type of chairing than chairing a meeting where you can see the other people in the group. I would also like to pick up the point on page 5 of attendance fees. When this came to Governance there was a discussion about that, and there was a nuance which was not reflected in the paper. In talking about attendance fees being paid to Council members, you have to be flexible and consider the type of the costs that those people have incurred in getting there -- [for example] travel costs. For some people it is easy to fit an hour's meeting into a day. For others it means that they have to get a locum for the whole day, so they effectively have had to give up a day's work as they would come to a meeting in Lambeth. For think people in that section there needs to be built in that the Chair is given flexibility and should recognise the implications of holding that meeting for the individual members of the group.

Ms Marcia Saunders: First of all, I would like to thank Alison. I think it is a terrific piece of work. I do not agree with everything in it, but it is a fantastic piece of work, which puts some very appropriate challenges to us about traditional ways of working. I really value it. As far as teleconferencing is concerned, I used to be utterly allergic to it until I did it and discovered it saved a huge amount of time, provided there are certain preconditions to it, including things like getting the papers in advance and having very limited agendas (not huge agendas) and a real focus for the meeting. I do not think teleconferencing is a universal panacea, but I would hope that we would create, through a change in standing orders, the facility to do teleconferencing and take decisions in that way. I think the problem that we have, and some have alluded to it, is one of perceptions, perhaps more than actual substance. There could be a theme developing as we move into the separation of exclusion, rather than inclusion. I do not think it is correct, but it could be misunderstood in that way; I think only in relation to special interest groups. I think it is just the wrong time to make people think that they cannot come to Lambeth and they will not be seeing each other and so on. I think it could lead to some mischief and misinterpretation -- deliberate misinterpretation, actually. I think the idea of having a proper discussion with the special interest groups is very good. I think Sylvia's suggestion that they be handed a budget is extremely good, because it is empowering. As far as the special interest groups are concerned, I actually think it is really something for the new body, is it not? Why do we have to plan their life? It is a new deal, is it not? And actually that may be true of some of the other recommendations as well, although I basically support all the other recommendations. I think for the special interest groups in particular group, let the new body to say, "What groups do you need? What do you really need to really function? If I were going to be a member of a new professional body, that is a very minimal thing I would expect, and I think it would be a very good message.

The President: I am going to move the conversation along. I am going to make a suggestion to you. What I am hearing around the room are several concerns about some of the recommendations in the paper. I am also hearing that we are very grateful to Alison for doing this work, which has been a difficult piece of work. I recommend that we do not move to adopt this paper at this meeting, that the meeting on 14 April goes ahead as planned and that we bring this paper back with their comments to a future meeting before we make any decision on this. Are people content with that course of action?

Mr Ray Jobling: I think we should do it. On the other hand, there are references here to major Council committees, and I think there should be slightly more discussion of that, if there is a prospect of change to some of those. I would like us to continue to get views on that, if the meeting were agreeable to that.

Mrs Sylvia Hikins: I wanted to clarify is that what I was talking about was not rejecting different ways of working. In fact in my IPG we do teleconference and email to over 2,000 members and so on. What I am talking about are ways of working differently and, if you like, devolving budgets to enable groups to work differently. I would like that meeting on the 14th to ensure that whoever chairs it does not come with a plan, but says: "Look, let us discuss ways of working differently. Let us think about whether you want a devolved budget and work out how you want to spend it; how you want to run your groups and how you want to bring new groups into the professional body. So it is much more open-minded and open-ended, rather than being a prescription and, "Do you agree with it?"

Chief Executive & Registrar: I think that is very well said, Sylvia. I was just looking at page 12/15, where I think Alison has expressed it very well. In the box on page 12, at (xi), (xii) and (xiii), you have expressed the same sentiment: "It is very important that members see this as positive progress to a new level of support and interaction with their professional body, important that the current members of these groups retain the ability to communicate with each other, potential new groupings of members are able to communicate with each other, that it is a clear route to council and/or National Boards." Paragraph 12:

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"The Committees of membership and SIG should work with their members and with the TWG to establish their needs.

Paragraph 13: "The chairs of the committees of the membership at xi should be given responsibility by Council to develop and implement these proposals." So I think Alison has put it very aptly in the paper and reflects the point you.

Dr Brian Curwain: I have very little to say, as Sylvia has said most of it. This is about new ways of working. It is not about: Shall we change this meeting to a teleconference? There are many ways of getting consensus from a group of people on a committee. But I think it is a very sensible proposal that the meeting on the 14th says to the Chairs of the Groups: Okay, how do we go on from here? We need to support you and we need to work out ways of doing it." I think that is the most important thing.

Mrs Beth Taylor: I wanted to add perspective of the Chair of Boards which handles (Inaudible). The paper makes reference to fact that the industrial pharmacists group uses that route. I envisage in the future with Brian that I envisage very productive relationships with other pharmacy bodies and representative sectors ... (Inaudible) in place through to those organisations, and extremely effective and cost-effective way of working. There is one point I want to raise in regard to continuing into the future it is important in the new PLB most places are filled by people, wholly or mainly working as community pharmacists, or whatever it is. I think the current situation is very loose and may need to be looked at in the new PLB.

The Vice-President, Mr Martin Astbury: I want to give some more background to production of the paper. I know that Alison had every opportunity to either meet the chairs, gave opportunity for them, whether physically or over the phone. There was a set format that everyone filled in, paper format, for sending in information about their various committees, and any other information Alison was willing to accept, if anyone wanted to send in to them. Also, a meeting has been arranged for meeting the membership groups. As one of the Chairs of the only Committee that is likely to be disbanded, I can still say quite categorically is that I would be very happy to support all the proposals on page 1 to 10. I would be very happy to support. I am happy to go with the President's suggestion, that we do not adopt any of the paper at the moment. This is an attempt to break the bureaucracy that we do have -- and I accept what Marcia says about the new body will have to decide where they want to go in the future, but there are improvements we can make at this moment in time, and I think this is a very good start to doing that and I am happy to go with what the President suggested, that we do not make any firm decisions at the moment. I was at the IPG and everything that Sylvia said is exactly what came from that meeting.

Mr Ray Jobling: Can I come back to the point on major committees? I serve on Education Committee and the Academic Pharmacy Group. On the Education Committee I am the only lay member. I think it is a good piece of work and I think it puts under scrutiny a key aspect of the way we actually work and ask us to think about that and whether we are achieving the objectives we are seeking.

In the box on page 4/15, item (i), it actually says it is proposed there are no changes made to the remit and functions of the Committee for now. In relation to the Education Committee -- and it is acknowledged really in the section on page 6 /15, the Education Committee is essentially a regulatory committee for a regulatory body, until there is a new one. It would be wholly inappropriate for that Committee not to meet around the table and have discussions. We know here what the business is. It looks at accreditation reports, fourth attempts and the whole meat of those meetings. It is essential that people should be there and seen to discuss and get the feel for that. It is true, of course -- and we all see it here -- that not everything important in the meeting actually goes on round the table. There are all sorts of things, when you are meeting informally, which you then bring back to discussion as it unfolds, and sometimes they are the more important aspects that enables the Chairman sometimes to get the business done, and you do not do it on the phone. In relation to the Education Committee, I hope it will continue to meet, not on fewer occasions, but at least on the same number of occasions, where it says that face-to-face meetings probably are justified, I think it is absolutely essential that they meet. There has been mention of bureaucracy. The Chair of the Education Committee, as expressed there is probably too little, in terms of bureaucratic support in the sense of officer support. I can make no comment as I am not the Chair. But that is the feeling. So on that front, I think it would be very unfortunate if there were any change in that way, in relation to the Statutory Committee and the regulatory body. That is not to say there is anything wrong with the report.

In relation to Academic Pharmacy Group it is a related body, and it would be a subcommittee I think under these proposals. That may be right, but it needs more discussion. It is an interesting committee because it brings to the table and to the business of the Society and would do for a new professional body, people who are not actually registered pharmacists, but are pharmaceutical scientists and so on. They are commonly very young academics who represent actually the potential leadership for pharmacy schools in the future, in some cases very active in the early stages of their research.

This provides them with an opportunity outside BPC and other settings to actually come and focus on aspects of the work of the Society and develop leadership in that way. So here is another setting where I think bringing them together and reminding you that the actual Chair of that Committee is a very, very experienced pharmaceutical scientist -- who took a pharmacy degree but never registered -- and he is the one who carries that business forward. So I think the paper and the recommendations are good, but at the meeting on the 6th these points will not be picked up, so I hope that they will be borne in mind. But I congratulate those who have done the work. I think it has provoked a lot of thought.

Dr Catherine Duggan: I have two brief points. One is to reconsider the purpose of the paper and the other might be to consider the tone and how we portray this. That is really fundamental to many things that are going on in our business at the present time: How we are communicating these things. I think the purpose of the paper is to revisit this; to enable members of a professional body to feel part of that body moving forward. That is not to disband or to throw out things that are working right now, but it is almost to future-proof it at this point in time. We have a year to get it in some people that people can feel -- what was it yesterday? We had 'emotive connection with new professional body'; not wait until day one and let people see where they fit. I think maybe to reconsider removing boundaries might be a very positive and helpful way to move forward. And we do need our groupings -- we do -- and those groups will exist with or without a professional body. You cannot tell people they cannot meet. Maybe that misconception needs to be stripped away. But I also see an added benefit of being allowed, if you like, or permitted through new ways of working of some cross-fertilisation between the groups, which I think would be very very helpful, and perhaps might be a win-win we have not necessarily exploited. I think the detail in the paper is extremely well-written and comprehensive. I think some of things are about fear of change. I am wondering, on the more positive elements, that Jeremy drew on, might be moved forward towards the front, so people get the notion that actually this is not about the mythology of disbanding, stopping things that work, taking good groups and throwing them asunder. I think that is what I meant about the tone. I think the content is very useful. We need to revisit this.

One final point that I had was about how some of the specialist groups work outside of the professional body. They are perhaps on more limited budgets and they have to find useful ways of working which might involve meeting around a conference, networking, emailing and teleconferencing; all of which work, but not exclusively rather than another. We need to become more flexible and allow people to feel that the body is creating grouping that they can affiliate with. I think it is an excellent start. The debate around the room shows that we need to consider this quite deeply and make it future-proof.

Mr Alan Kershaw: In Committee reviews you never make friends. You have a strong risk of making enemies. The best you get is sympathetic looks! **(Laughter)** I have done it and believe me it is not nice. You try and do your best, and I think Alison has done a good job. It has made us think, which is fine. There is a lot on the table. I wanted to suggest a slight modification on what you are proposing, because I have never read this that we are making final decisions today on anything that relates just to us, but where things do relate to us, in the ways of working, and specific things about our Committees that we could make decisions and get on with this, and I am very happy to do this. So it is only the bits about membership of SIGs that we need to hold over. I think the flavour that is suggested about that is absolutely right. My concern is that there is some sympathy for teleconference for the types of work that it is well suited to, and where you have something that has been pre-digested and you need a specific decision, teleconferencing is the main way of working as an adjudicator, for example. We only meet when we have to interview people who are coming from outside. There are good examples of this working. If we do not make a decision, we will be in limbo, because there is sympathy for it. Some Committees and Chairs may want to get ahead with particular things, but they cannot because the back-up is not there, the standing orders are not there and the business about getting paid is there not. It would be a good idea to get that in place, and I think we are pretty well ready to do it. With the SIGs meeting the 14th I think the flavour suggested is exactly right. Here is a proposals which have made us think, and the last thing we want to do is diminish what you are doing. The aim is to ensure that you can do that as effectively as possible, given there is a new world coming when this may well change anyway, and the new body will have to make its own decisions. In the meantime, we try to make things and

streamlined and light on their feet as they can be. That is the flavour. Here are some ideas. Here is what Council says -- and we have already heard some concerns about this -- we relay those to the meeting on the 14th and then see what comes back. We really are asking Chairs of these groups: Are there things in here that would help you, and which would get things better, in the short interim before things change anyway?

If it is acceptable, subject to whatever has been said in discussion about specific points, things relating to us we can adopt today; adopt in the sense of "this is now policy," and adopting the others is just adopting them as a basis for discussion with them, given the concerns we know already exist.

Mr John Jolley: A point of clarification. Given that one of the proposals on page 5 is the change in the method of remuneration, would the impact of that be that all Council members and National Board members would revert to those proposals we discussed following the Cumberlage report?

The President: Sorry, John, but I personally do not understand the point.

Mr John Jolley: The question being is that there is reference made here to the fact that payment ----

The President: Which page?

Mr John Jolley: Page 5: "RMC has proposed that attendance fees be payable to Council members attending by tele and video-conference scheduled committee meetings, and that the amount of attendance fee payable, whether quarterly or half-yearly, be set up by the appropriate ----

The Vice-President: It is a day rate for that meeting. If you had a two-hour meeting, the Chairman may suggest that you had just a quarter payment or a half payment. It is just a day allowance.

Mr John Jolley: Okay. So it would be going over to an annualised figure.

The Treasurer: Could I confirm this? Lorna made a query about flexibility of payment. The Chairman has a discretion by that quarterly, half-daily rate to award what he thinks is applicable.

Mrs Lorna Jacobs: The point I was making in relation to point 5 is that what is an appropriate fee does not only depend on how long the meeting takes, but the implication for individual members of that Committee may be different.

The Treasurer: I think the discretion is there and I think you have that conversation. I think any reasonable explanation for why you would want it more than a quarter or half-day. I think any Chairman would take that on board in a responsible manner.

Ms Marcia Saunders: I do not think this is the right place to go into the detail of how we do that. I personally hope that we create the facility for teleconferencing and leave it at that. I did want to reiterate the point that, as far as our own committees are concerned, I really hope we can take the opportunity to streamline them now so much as possible for our last year. Certainly for the two committees I am a member of (Law and ethics, which has now changed, and Governance, which has changed) I completely support these suggestions. I was thinking earlier in my career I had to allocate parking spaces to consultants in a hospital, and I never thought there would be anything more difficult. **(Laughter)** ... **(Inaudible)** My last thought was that this meeting on 14th, where you have leaders of all the special interest groups, those of you who will be there might want to take the temperature of that meeting and see whether actually facilitating them continuing to meet as a little group, to think forward and do some thinking about the new professional body and how they would relate and talk with the chairs of the National Boards; you might seize that opportunity. Because the more engagement of that sort we can get, the better it would be for the future.

The President: I think that is a very constructive comment. If I understand Alan's proposal correctly, the suggestion is that pages 1 to 10 of the report be put to Council for adoption at this point in time, and the issues to do with special interest groups be further discussed at the meeting on the 14th and brought back to Council for further discussion.

Dr Brian Curwain: Would it be helpful to consider whether we want to invite the Chairs of special interest

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groups Council next time we discuss it, to have them here in person.

The President: That is a good idea.

Mr John Gentle: At the bottom of 8/15 it refers to "Council should consider whether it would be useful," in reference to Conference Committee, "to appoint a specific members of Council to lead at the BPC in related issues each year." I wondered whether it is intended to make that decision now, or put it on the table as a job that needs to be considered and we do it at a later date.

The President: I think it is consideration of the latter. Are we content to go ahead on that basis, Council? **(Agreed)** Thank you, Alison, for your report.

18. Transitional Working Group Report

The next item is item 18, which is page 41.

Mr Howard Duff, Director of Quality & Improvement: I am pleased to provide you with the latest Transitional Working Group report. As last time, it is in two. We will be looking at public business now, then later there is a short one under confidential business. You recall we adopted the programme reporting approach. Apologies that it is not in colour. Will try make it in colour in future. Before I go on to that, I wanted to mention one of the reasons for the Transitional Working Group is for them to manage the risks on behalf of Council. The approach to risks and risk register was taken to the Audit Committee, and they are happy with what is going on and are confident that risks are being appropriately managed. So it got a clean bill of health on that one.

I want to concentrate on a couple of the 'ambers' in the report, the landscape chart. On the first page, it is all green apart from leadership and advocacy. One of the aspects of the last Transitional Working Group, it was felt there was a need to get behind a common unified vision for where we are leading the profession towards. So everyone's preconceptions can be managed and everyone knows there is a single vision that we are signing up to. David Pruce has written that down. It will go through the Boards and will go back to the Transitional Working Group and come back to Council. So there will be a consolidated, unified vision that would be single unified vision that everyone is aware of and can sign up to.

Turning on to the second page, the professional development and education work stream is also amber. One of the reasons is the project to gather what the major employers required from CPD for their employees is running behind schedule. But that will come back on track. We now have specification on the website. I will have an opportunity to go through some of that later, as I go on to talk about some of the deep dives we have been doing. The other amber is the professional support work stream. The work stream as a whole is green, but one of the projects within that around advice and support through a single portal. That has been delayed. It will be back on track, but it is currently amber because the costs have to go back to the TWG at the next meeting.

The President: Are there any questions?

Mr John Gentle: Just under professional networking, under local support to networks and the local practice boards, that is on track for 2010, January. If we are on track, within seven months, to have a professional national network of viable local practice forums, that is news to me and I am sure Dave might consider it surprising that we are on track for that. Might I suggest that that is a tad ambitious to call that green? A Very very very light shade of green perhaps -- more what you might call amber? **(Laughter)**

Mr Howard Duff: Thank you for the challenge, John. It is planned to have groups identified by that stage.

Mr John Gentle: I agree there is a plan to have it, but that is not quite the same as saying it is on track to actually get it.

Mr Howard Duff: In terms of project reporting, until it is off track, it is on track. **(Laughter)**

Mr John Gentle: So despite the fact that we have this sort of Ivory State, St Patrick's day shade of green all over this paper, on March 31 next year it might switch to red?

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Mr Howard Duff: I think we will know before then. We have events for plans in place that will deliver it in that time. If those are not on track, it will be amber or red by then.

Chief Executive & Registrar: I think, John, your point is right. It would take quite a long time to have a comprehensive network across England, Scotland and Wales of local working practice forums. What is indicated here is that we will have some viable LPFs up and running well ahead of the launch. We already have four, I think, nascent LPF's that are already being worked on. So we will have a viable demonstration of how LPFs work, but we will not have a comprehensive network across England, Scotland and Wales.

Mr John Gentle: I think we might agree that we might have one or two outline proposals for them, as opposed to: We will have viable network forums. My concern might be what are we to do with the rest of the branch network, before the Local Practice Boards are running; particularly in terms of finances. Is the proposal to close down the branch network and replace it with four local practice forums, about which I have a grave concern?

Chief Executive & Registrar: I think there is a conversation. One of the things we will be examining during the year is what efforts, in terms of finance and people, it takes to run an LPF. When we understand that, we will know the financial envelope we have to work in. Those considerations will carry on during the year.

The President: We are not at that stage.

Mr John Gentle: Is the intention to run the local branch alongside the LPF?

Mr Howard Duff: As far as the people are concerned, they are not intending to disband the branch.

Mr John Gentle: But at some point we will have to, if we are going to replace it with an LPF. So what would be the target date for doing that? Is there an idealistic date, that by the end of 2010, or the beginning of 2011 we will have a replacement network, so the branch will not exist but the LPF will?

Mr Howard Duff: We cannot impose the idea of changing a branch into an LPF.

Mr John Gentle: We think withdraw finance from the branch network and close it down.

Mr Howard Duff: It is an option we can look at, but it is not something that has been decided on yet. As I go back to this idea, we are not sure what the cost of LPF is. We are not sure what finances are available and how it should be split between any local manifestation of the Society.

Chief Executive & Registrar: And the decision point on that is January 2010, when we have got some demonstration of viability of local practice forums. That is why we have the work going on in the four plus areas at the moment, so we can come to an informed decision on that in the early part of next year.

Mr John Jolley: I would agree. It is just that we know what the branch network costs now. We have a long experience of that. I would suggest that by April 2010, we will have no real idea about what a national local practice board network will cost us, and we do not know whether it is applicable, because in some areas the branches may not want to go down that road anyway. My problem would be at what point are we going to take a decision -- particularly in a reduced financial situation, which the Treasurer has mentioned, which almost certainly we will be in. We might have to bite the bullet somewhere along the line and start to talk to Branches and say, "We cannot afford the current network in its existing form, which was one of the *raison d'etres* looking at LPFs anyway. At what point are we going to have to bite the bullet? Would that be in April 2010?"

Chief Executive & Registrar: It has to be before that, in January 2010. In order to make that decision, we need to know what the alternatives are and how viable they are. That is what the work is between now and January.

Mr John Gentle: In general the plan for LPFs is a good one. I hope it is very successful and I hope that lots of branches around the country take things on. But I am not convinced that we will have anything concrete by January 2010.

Chief Executive & Registrar: I think we will have some real demonstration of the viability of LPFs and that would be a very good stimulus to other branches and guide their view on how they would like to transform themselves. We cannot mandate it now. All we can do is explore what is possible and encourage branches to think about those options between now and January.

I think the BRM will be very useful for that, but January is going to be decision point on funding.

Mrs Sue Kilby: As you can imagine, I have a number of points. The First is around the LPF issue. At the moment there is no funding coming out from the Society to help us set up and get these LPFs off the ground. I am not sure how we can charge for people being part of LPFs going forward. I do not know whether you want to take that now or later. For example, if the local head of medicines management decided they were not going to be part of the new professional body, are you going to exclude them from the LPF? Yet they are going to be one of the key people. Likewise, if the local head of the school of pharmacy decided they did not want to be part of the new professional body, but they key within the LPF, I do not understand where we are with the thinking around this and how that is going to be managed. It really comes back to what John is saying. We have got to start working and managing with the branches now, to get them to think, going forward, how they are actually going to support that. This is what I am trying to do down in Brighton. We are asking them to think about -- they have done lot of good work in the branch. We do not want it to collapse. We want it sustainable going forward. That is one area we need to think about.

Second, the stakeholder meeting. One of the keys things that came out of that was prioritization. How have we reflected the comments from the stakeholder meeting into what we are doing as far as a work programme? I would be interested to hear from you on that basis.

Thirdly, Cath savage; will that make a difference to the work programme, and how it is rolled out?

Fourthly, around clinical leadership. This has been raised by a very high profile pharmacist, looking at it as far as the new professional body is concerned. I would be interested to hear how you envisage this new professional body taking up the role around clinical leadership.

The President: They are good questions, Sue, and they are all points of detail.

Mrs Sue Kilby: No, they are not detail. They are actually fairly broad strategy points. We do not seem to have the forum or opportunity to be able to discuss these points. As council members, will are being cited as being the leaders and overseeing the whole process. I feel I am quite detached from what is going on in detail, despite offering, on a number of occasions, help and support. I do thank people like Lyndon and Howard who have actually tried to involve me, what is going on I do not have a handle on. If I do not have it, I feel that probably there are others around the table who feel in a similar position.

The President: There are a couple of issues. You have mentioned Cath. We are in public business, so we will deal with that later on. Secondly, the TWG were the forum set up by Council to oversee the establishment of this and report back to Council on the strategic issues and the way forward. The level of detail that you are asking, in my personal view can be left quite comfortably to the work stream leaders. If there are any specific questions you would like to ask the work stream leaders I am sure they would be happy to respond.

On the general question of prioritisation, that was a good question asked at the stakeholder group, and we need to understand and prioritise resources, and we have not done that yet. That is where we are with those questions you have raised.

Dr Catherine Duggan: Can I say there are plans afoot to engage clinical leadership. All the specialist clinical groups are planning a series of meetings over the next 12 months (a) to talk about engagement with the new professional body and the relationships, and Jeremy is leading on that piece of work. But alongside that, we are setting up a specialist curriculum group, and all of these things. So those pieces of work are going on actually outwith of the Pharmaceutical Society as well. We are, if you like, two pieces of parallel work. That piece of work is going ahead and we are moving to dovetail the two.

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So that hopefully clinical leadership will be evident and apparent in the coming month.

Mr Douglas Simpson: I want to talk about the branches. They are our grass roots structure. They exist now I am Chairman of the Bromley branch. The branches are run on a wing and a prayer with very little support. A small sum of money goes to the Branch Secretary as an honorarium. There is very little understanding, in my view, about these local practice forums. Very few branches know what it is all about. You can understand that the people at the top know what it is about and they are trying them out in various parts of the countries. The branches need to know what to do now. We are coming up to our AGM at our Bromley branch and sign up to a programme for next year. What are the branches supposed to do in the future? Are we going to carry on? We need to send out some sort of message here and now to our natural local supporters -- again, I mentioned this -- who are in the branches. We need to give them a message on what they should be doing in the future. Should they carry on or should they go into limbo? Some message needs to go out, almost straight after this meeting, about what the branches are supposed to do in the meantime, while we are deciding what the future organisation should be in the future. They are a valid part of the Society. It is the way the Society is organised locally. Some of them are very good. The Guildford Branch, and the Mid-Surrey where I went down to speak, are fantastic branches. Others barely struggle along. We have got to send out some kind of message immediately to cover branches of what they are expected to do, in the interim while other plans are worked up about local practice forums.

The President: All the branch secretaries have been communicated with about the plans for local practice forums. We took an approach where we were not prescriptive how to we should approach local practice boards, as we are aware there is some good thinking out there. We have now gathered that, but I accept that now is the time for us to provide some slightly more detailed guidance for current branches and other bodies out there that may wish to become local practice forums. That will not be immediate, but it will be in the next couple of weeks.

Mr Douglas Simpson: Or what they should do in the meantime, even if they do not want to become local practice forums. It is not just about becoming a local practice forum, but about how they should conduct themselves in the immediate future.

Chief Executive & Registrar: Can I reinforce what Howard was saying -- and it is a very important point, Doug -- that we need to give some guidance now. Having sought their views, we need to give some guidance, and a good opportunity to do that is the Branch Representatives Meeting next month. It is a good landmark in the year and we ought to use it.

Mr Ray Jobling: The Pre-registration Pharmacist Liaison Group meets regularly, and met this week. It attracts to the table all the players in the sphere, all the stakeholder, including tutors and those who provide training places in corporates. There are people there from the Department of Health including, on occasion, people who are very highly placed within the scheme of things. The general atmosphere normally is one of, I would say, polite and quiet enthusiasm -- a very workman-like group. I must say everybody is benefiting from that. This week -- I really ought to report -- that I was taken aback, as I chair it, the level of passionate concern which is expressed about the transaction in relation to pre-registration. This is not a criticism of anybody, but there is great deal of anxiety and concern about lots of issues. It would be inappropriate to go into detail, but I should report that, as a matter of responsibility of the chair. I notice that the work has not started, and will start in September, but there will be lots of preparation. I hope there will be some discussion of matters that were raised there. The Chairman of Education Committee was there, and she might be the appropriate person to liaise with on that, because I think a lot of it is directly a professional matter, and I am willing to help with that. But as I say, a meeting which is normally quite quiet, and generally polite, suddenly got into a sphere which was quite different. I personally had to take note of that and I think we should.

Mr John Gentle: Were the BPSA invited to that meeting?

Mr Ray Jobling: Yes, they were.

The President: Are there any more questions on progress?

Mr Steve Acres: Just a quick point on local practice forums. We have talked about the support we can give from Council, but actually the way that local practice forums will develop is only if there is strong local

leadership. I think our role is more of a facilitating and supporting role.

Mrs Alison Moore: Can I ask a quick question on governance, not necessarily for Howard, because he may not know the answer, but do we have information on the level of response to the Trans Com consultation?

Mr Howard Duff: We have had a positive response, from what I am hearing. A number of people have responded and I do not think there is such contention.

Mrs Alison Moore: I was asking more what was the tone? Have we had a significant response? What should we be doing?

The President: I do not know what level of response we have had. I know, however, that the vast majority have said yes to the questions that were asked.

Ms Seema Agha: On work stream, has it been prioritised 1, 2 and, what is more important than others; what work streams are ranked as being more important than others?

Mr Howard Duff: We have started the prioritisation scheme, which Steve referred to and you may not be aware of ... **(Inaudible)** discussing this week, and that identifies I think seven absolutely drop-dead, number 1 priorities we have got to deliver.

Ms Seema Agha: So that would go to your marketing, that these are the promises, the deliverables?

Chief Executive & Registrar: Just to say we had got a few slides prepared, but I do not think we have time to outline the deep dives that have taken place on 4 of the work streams. What I was going to suggest is if any member would like to have more detail on those four work streams, they are welcome to contact the work stream leaders. Those are professional developments in education, professional support, leadership in advocacy, marketing and costs.

Mrs Alison Moore: Could we have slides circulated rather than having to ask for them?

The Registrar: I wondered about that. Actually, they are bullet points and do not tell you a huge amount on their own. They are not really stand-alone. You are very welcome to have them, but they do not tell you much. They are a prompt for discussion.

The President: We will circulate them anyway. The work stream leaders are always available for you to ask further questions on the detail. I think they would be more than happy to do that.

19. Public interest and health issues

No matters have been raised, but you heard Howard say that David has been working on the vision for the new professional leadership body, which is out for consultation amongst the various groups at the moment. I propose we bring that vision back to the June meeting of council and we discuss that under the heading of public interest in health issues. I suggests that would be a good topic for Council to discuss.

Any other business?

Mrs Sue Kilby: So David has developed a vision for the new organisation. We have not seen it yet, but it has gone out to the other organisations?

The President: It has not gone to to other organisations. It has gone out to TWG and National Boards for consideration. It will be brought back to Council for discussion.

20. Any other business

We have paper 47 which is for noting, which is the MHRA paper, and paper 48, which is a paper on English language competency, from the issue Gerald raised at the last meeting.

Mr Gerald Alexander: There is a point that actually changes the meaning. There is a word missing in the paper that actually changes the sense of the way the paper is written.

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If you go page 2/3 and look at 1.5, it says: "The Health Professions Council, the Nursing and Midwifery Council and the General Medical Council have declined their support. They have declined their 'financial' support, but from the emails I have read, there has been very positive feedback on the proposal from other regulators. Hence the absence of word the financial support tends to alter our understanding of the paragraph.

Mrs Wendy Harris, Deputy Registrar/Director of Regulations: The sentence immediately prior to that says we can (**inaudible**) Moral and/or financial support." Certainly there is lot of moral support.

Mr Gerald Alexander: But not financial support.

Mrs Wendy Harris: We are bringing this to you on whether we seek legal advice to take this matter further. Just to give you, by way of background, I am now talking about registration of those applicants who come from within the EEA, so the European Economic Area, which is wider than the EU. There is a Directive -- I will not give you the details in terms of numbers -- that is contained within the paper. This deals with the recognition of professional qualifications. It does not deal with the registration of professionals. So recognition of qualification and registration with a professional body for administrative purposes and disciplinary provisions are two distinct processes. This Directive deals with the recognition.

However, in interpreting it the Department of Health are categoric that language testing cannot be undertaken for EEA nationals applying to go on to our register. Rather, that if their qualification is such that we recognise it, they have automatic right of transfer through the mobility of the workforce across Europe. Conversely the EU Commission's interpretation of their own article is that they are not against language testing per se, and in their guide on transposing this particular directive to the Member States, the Commission refers to language testing needing to be proportionate, and not part of the recognition process. In other words, it is a separate stage.

Gerald, through his PGEU contacts and membership -- and I am indebted to Gerald for receiving it -- has also sought similar advice. Again, we have been informed that proportionate testing is appropriate. It should not be systemic. It should not be absolutely thorough, in as much as we are not going to gain a Cambridge or Oxford certificate of language for them, but rather that they are competent to read, speak and write English to a level that maintains patient safety.

In our Council section 60 response working group chaired by Seema we put in a significant response to say we wished the order to contain a two-part process for us; one which is following the Directive, which is the recognition of the qualification, and the additional second step where we would look at the language competencies. The line from the Department is that this is unlikely to be considered at this time, they believe it is wholly the responsibility of employers to undertake the language testing and not role of the regulator. I now share with you that we have two cases currently going through Disciplinary Committee which involve EEA registrants, which are both directly associated to their lack of competency with English language.

Knowing the Department of Health's view and how they are interpreting the Directive, I had already asked the Overseas Team to survey employers, and we are about to send out that survey, because it is important, if we are going to take legal advice, for us all to have the other part of the picture as well: What are the employers doing towards language testing? Have we assured ourselves that appropriate steps are being made? If not, what else might we do?

This paper is brought to you to explain that and also to say to instruct and just to take that first-line view to inform Council as to whether a challenge to the Department of Health and their interpretation of this Directive is appropriate will cost somewhere in the order of £5,000 to £7,500 plus VAT. That is Just for that one piece of advice. It will not take us further in taking any challenges on. It is just the advice to you, should you deem that you would like to take that instruction forward.

Mr Alan Kershaw: We simply have to support this. This is the biggest step we could take to patient safety in one go, as far as regular regulation is concerned. I do not think spending the money will get it, but it quite that the position is uncertain. It has been a shibboleth in professional regulation for as long as I can remember, in more professions than this one, that you cannot test for language at a regulatory level. I have never understood the logic of that. We apply language testing levels to anyone we can from outside the EEA, at a certain level, via the Adjudicating Committee.

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We expect schools of pharmacy here to check the same level of competency when overseas students come to study here. It is simply fanciful to imagine that employers are taking this responsibility seriously. They simply do not, or at least not in a consistent way. There are cases in all healthcare professions where you end up at the Conduct Committee because of basic communication skills failings. Communication skills are difficult enough in your own language, let alone in others. I think we simply must commit the money to get this advice and see if we can advance this case. It may be the best chance we get.

Mr Ray Jobling: Here, here, is what I would say. I strongly support this. Trust, assurance and safety. What on earth does it mean, if you cannot spend £7,000 plus to get advice on this matter. I personally cannot understand the Department of Health's position. We have to do this. In my view, it is the only responsible way forward and I think the public will thank not just the Society, but will thank the profession for taking initiative in getting this clarified.

Mrs Lorna Jacobs: I would like clarification. The Department quite happily puts the onus on employers, but I presume there are pharmacists who are not employed. I do not know if they see that someone is doing a contract with a PCT, that a PCT would do that test, or in fact there is anything to stop a pharmacist setting up as a self-employed, not NHS, service. Then the public will rely on the regulator to say that this man or woman can run a pharmacy and is safe to practise pharmacy. Where do we stand? Where does the Government stand, in terms of safety to the public?

Mrs Wendy Harris: The survey of employers is very wide. We are going to NHS employers, to corporate multiples and locum agency.

Mrs Lorna Jacobs: The simple point is that not all pharmacists are employed. They can work as self-employed, and then it is only the regulator who can provide that assurance to the public.

Chief Executive & Registrar: In theory some self-employed pharmacist who have a contract with a primary care organisation, for example, the onus would be on the contracting body, the primary care organisation, but there is no clarity as to whether that responsibility is being discharged.

Mrs Lorna Jacobs: I am fairly sure that primary care organisations do not ensure the language and communication skills of all people taking on contracts. And if they did so for certain people and not others, they might fall foul of discrimination, so they would be in a double bind.

Ms Seema Agha: I think it is a Department of Health fudge. I think it is double standards that people from the Commonwealth are required to have language testing, and sometimes they are going to very credible Universities where often they speak more English than in their own native language. So I think just because you come from Europe they apply a different standard -- if I went to Spain to practise pharmacy, I would not have the level of competence to converse. They would need take to take the risk, a two-way risk. I think it is a public interest and public confidence issue, and it will undermine the confidence in pharmacy. All the good work that has been done will be eroded when one patient has one bad experience, and says, "Oh well, they are not responsible. They let these people in to practise." What would be very helpful, perhaps through branches, the intelligence gathered of what is happening at a local level, so you get a bigger picture of how big the problem is. One problem is big enough, what is the pattern; what happening at a local level to put it together for the Society to put it forward even for Counsel's opinion to say: These are cases studies that we have picked up that is affecting patient safety, so people have something real and large to work on, perhaps anonymously, to say to Council, "This is what is before the Investigation Committee, and we are in this difficulty.

Mr Douglas Simpson: Just to point out that it is not employers only that are liable under this, because we have just passed this professional standards in guiding pharmacists and pharmacy technicians in positions in authority, and one of the requirements in there is that they should ensure that people have sufficient language competence for their work. It really is a ridiculous situation we have got ourselves into. The other point is that some employers are big and can set up this kind of system to enable this kind of testing. Others are small, particularly independent pharmacies. It is better if the professional body sets up a safety net, rather than expecting individual employers to pick up the pieces further down the line. I think need to try and resolve this issue. I do not know how we will do it, but taking legal advice is a good first step.

Mr Gerald Alexander: You probably know that I support this, that is the first thing. Having sat on the Adjudicating Committee since 2002, I think in the early days we did not language test overseas pharmacists. It then became part of the process that pharmacists from overseas outside of the EU were tested with the higher test to the technical standard 7 across all the components. Then EU Directive 205-36 was implemented, but that Directive was purely about the movement of labour across Europe in relation to professionals crossing borders. The issue that the EU was concerned about was that there should be free movement of professionals. From all the soundings I have taken, it was never the intention of the EU Commission, or in the EU Directive, that this would prohibit regulators from language testing those individuals, if you look at the two-stage process that Wendy has outlined.

I think what we are really asking here is to have a lawyer review EU legislation, which does have primacy over our legislation in this respect, to see to look at the interpretation that has been placed on this by the Department of Health, in order that we can support our representations to the Department of Health to remove the prohibition of language testing at our second stage before registration. I hope Council will support that.

As far as risk is concerned -- it is interesting in the paper -- I do not think there is a risk, actually. Being open and transparent as a regulator, if the advice supports our position, fine; if not, and it supports the Department of Health's position, that is also good because it provides clarity. I think I would still be concerned that language testing would not take place, but I think we are going to take the appropriate steps in relation to employers and find out the level of seriousness they apply to this situation, when they employ an EU pharmacist.

There is an issue over the legal brief. I have been thinking about that, because we are talking yesterday when, Robert Bulling, was here about the situation of privilege. If the legal brief is written in such a way that we could actually talk to lawyers to say that we would like this advice to be completely open, and therefore we would like potentially to have the ability, should we wish to do so, to publish the information to our profession, so the information is in the public domain. Obviously we would like to support our case to the Department of Health, but clearly if we have the information in the public domain I think that strengthens the case that we have been advocating for some years now. I hope the Council will support this recommendation.

Ms Marcia Saunders: I want first to support this, but also to pick up on points about contractors and employers. The point about the PCT is that PCTs would assume far less status than contractors. We are not their employers, except in very limited circumstances. The performance management systems for contractors are much more highly developed with doctors and nurses than they are with pharmacists. Of course, the market in pharmacy is much more fragmented. You have many more employers, which is one of the differences we have from doctors and nurses. That did make me think. You talked, Wendy, about surveying NHS employers. Are you actually having discussions with NHS employers, the organisation, which could be very helpful?

Mrs Wendy Harris: We are working through the NHS Confederation, so that we achieve a wide spread.

Mrs Sue Kilby: First of all, I would like to congratulate Gerald in pursuing it and getting this brought to Council. I think it is a really important issue. It also shows the value and benefit of actually having somebody operating at a European level as well, because then we have direct discussions and opportunities to compare what is happening in the rest of Europe. I think that ought to be remembered going forward for the new professional body. We are not just in the UK, but maintaining links at an international level. I would like to thank Wendy for contacting the locum agencies, because I think this is a particular area of concern. Having worked as a locum, people never see you directly. You just send in a form. So they never have an opportunity to talk and perhaps assess the quality of your English, because who has completed your application form? It is not necessarily the person who is going out as a locum. I think if I was a community pharmacist who got somebody from an agency -- maybe because I had not been able to get somebody from my regular agency, but I am desperate and I need someone and I have this person turn up when I may not be there, I would not want to be in that position. So I think locum agencies are a particular area of concern. Thank you, Wendy.

Mr John Gentle: With my deep love of all things European, and particularly regarding the EU, I think on this occasion we should express that by extolling to our own Government the advances of EU legislation. I think what Marcia said is quite alarming really, because it seems to me that comments amount PCTs

and contractors seemed to suggest that an EU pharmacist, or any pharmacist for that matter, could come to the UK and sidestep the public protections that are there, in terms of going via the employer, because that relationship would not exist then. That is quite alarming. My own firsthand experience of some of these cases was where companies sometimes get this wrong by mistake. In one instance, we were aware of a pharmacist from Poland who spoke very good technical English. The company went a long way to helping her move into the UK, in terms of dealing with bank accounts and social issues. Then they moved her, having trained her up in one part of the country, to another. It is not so much technical the English; it is the colloquialisms. If you train somebody in the Geordie Nation (as Dave refers to it), then move them to south London, then the colloquialisms for a chesty cough (of which there are around 250 in the UK) it is very very difficult for a foreign pharmacist who has learned one accent to move to another part of the country.

The company did this to this poor girl and six weeks later she was back in Poland. She could not cope.

When you refer to cases before the Statutory Committee, are the pharmacists before the Statutory Committee, or their employer?

Mrs Wendy Harris: It is not just the language. The language is directly involved, but there are other things.

Mr John Gentle: Whilst I accept all cases are different, and I am not aware of the actual details of the case, here we have a case of a pharmacist where there are one or two problems, they have gone to the Statutory Committee, now under regulations and the rules as they apply, our own Government believes it is for the employee to deal with these issues, yet the employer in this case presumably has failed, and the employer is not taken by the regulator and we are not taking action. It seems to me there are a few things we should do. First of all, if we are going to take this action, which I support, we should publicise it and we should fire, if you like, a warning shot across one or two bows and hopefully that will have an effect. Secondly, we should start to look at our own mechanisms. If this is a case here -- and admittedly I do not know all the details, this is a case that is absolutely ripe for the employer to go to the statutory committee and be attacked by the regulator, or brought to book by the regulatory. If that is not happening this case, surely even the weak safeguards, as I would regard them, are not enough. We need to tell the Government this.

Mrs Wendy Harris: I do have sympathies with your point of view. At the moment, because these are two cases that are going through, it is not appropriate for me to discuss them here, albeit to say that neither of them involve the employer in language testing. The language problems have come through a different route.

Mr Douglas Simpson: I think comments should be treated in confidential business, not going on the record, because the case is still live.

The President: We have to be careful in terms of detail.

Mr Ray Jobling: Gerald is right. When we began to go down this road, it was about the movement of labour within a labour market which is Europe-wide. It comes out of a stable that was interested in industry in that way. The EU did not have -- and I think still does not have -- terrific competence in health -- competence in both senses of the word. It is down to us really to think about this. They will not put the patients interests first; we do. The Department of Health is not leading on it; we must, in that way. That is why I think it is right that we deal with it. I sit on the Adjudication Committee, and when this came to my consciousness, I never discussed the cases but I did talk about the general principles to colleagues and friends, and they were puzzled through to scandalized at the thought that there would not be an appropriate and proportionate approach to this testing issue. Nobody is suggesting some elaborate written system for anyone and everyone, but there should be some provision for it and we need to get that clarified. I think we are absolutely right to do it. Yes, I think it should be in public. If we buy the advice, presumably it is ours and we should use it appropriately in the public interest. I do think there needs to be a much more general discussion of what is happening here. Again, nobody wants to inhibit the movement of professional pharmacists when they can do a good job in Britain, whether they are from inside or outside the EU. But it is extraordinary that you have a framework for testing people, simply because they come from outside the EEA or the EU, when you know that there is a potential for problems within the EU, where there is huge language diversity across these countries.

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I think it is a key issue of public safety and the benefit that can be derived from service. What on earth would a pharmacist or pharmacy technician do if they are in the pharmacy one day, working alongside a colleague and they get agitated about the fact that the person they are working with cannot really communicate appropriately and safety in English. Surely they have to put up their hands and say, "I cannot work in this circumstance. As a professional, I think patients are at risk." What then?

The President: Do I have Council's agreement to get legal opinion? **(Agreed)** I propose we return at 11.10 in confidential business.

Mrs Sandra Melville, Chairman of the Scottish Pharmacy Board: I would like to thank Council for coming to Scotland and to thank you for a pleasant and successful evening last night. It was really good to meet with Scottish pharmacists.

A lot of people have said how impressed they were by how enthusiastic and innovative you were. Somebody said to me last night, "I do not expect Council will be back. It is the end of an era." I would like to think of it as the start of a new era. Thank you.

The President: thank you, Sandra Can I thank the staff here in Edinburgh, and especially Elaine for the arrangements for the Council Meeting. **(Applause)**