



**A cross sectional survey of Scottish pharmacists'
views, experiences and attitudes
towards the branches of the
Royal Pharmaceutical Society of Great Britain
and their functions**

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1 Background

The local branches of the Royal Pharmaceutical Society of Great Britain (RPSGB) have provided support, education and networking opportunities for members since 1922. There are 130 branches with 12 in Scotland. Anecdotally, meeting attendance is poor with some branches inactive.

This study was carried out as part of the undergraduate MPharm course at The Robert Gordon University. The aims were to

- determine Scottish pharmacists' views, experiences and attitudes towards RPSGB branches
- identify facilitators and barriers to branch meeting attendance
- explore future preferences regarding a local network for professional support.

2 Method

A questionnaire was developed by an expert panel including members of the Scottish Pharmacy Board and piloted on a random sample of 100 members, resulting in one minor change. Data from the pilot sample were not included in the final study.

The final version of the questionnaire (see Appendix 1) was sent by post in November 2007 to the registered addresses of a random sample of 1000 members of the RPSGB in Scotland, provided by RPSGB (approximately 25% of members resident in Scotland). Up to two reminders were sent to non-respondents at 2-weekly intervals. The questionnaire contained items on

- respondents' demographics and branch attendance
- facilitators and barriers to attendance
- methods of branch communication
- views and attitudes of respondents towards the functions and activities of the branches.

Open and closed questions and attitudinal statements with five-point Likert scale options were used to elicit responses.

3 Results

3.1 Response rate

Four hundred and four questionnaires were returned (response rate 40.4%).

3.2 Demographics

The majority of respondents were

- female (n= 265, 65.6%)
- practising pharmacists (n= 356, 88.1%)
- community pharmacists (n=209, 51.7%)

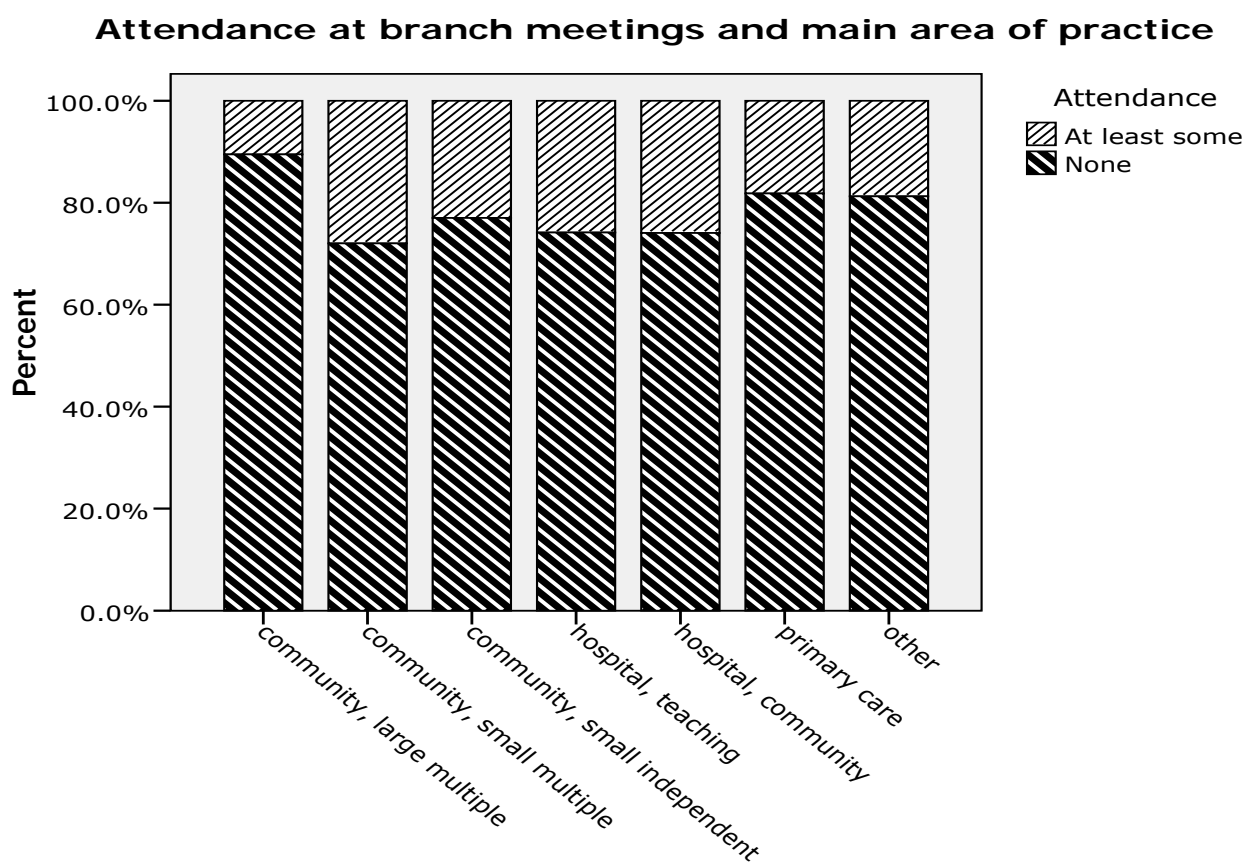
Other areas of practice were hospital (n=87, 21.5%), primary care (n=33, 8.2%) and 'other' (n=16, 4.0%); the most common age group was 35-44 years (n= 114, 28.2%).

3.3 Branch attendance

- Eighty six respondents (21.3%) had attended branch meetings in the previous year; thirty one respondents (7.7%) had attended most or all meetings.
- Three hundred and seven respondents (76%) had not attended any meetings in the previous year.
- Pharmacists registered for more than 20 years were significantly more likely to attend branch meetings ($P < 0.01$, Chi-squared test).

- Pharmacist prescribers, pre-registration tutors and branch committee members or office bearers were also significantly more likely to attend meetings ($P=0.001$, Chi-squared test)
- Although attendance was low across all sectors of the profession, sector of practice did make a difference, with those working for the large multiples least likely to attend ($P<0.05$, Chi-squared test) when compared to all other sectors.
- There was an association between possession of a post-graduate qualification (ranging from PG Certificate to PhD) and attendance at meetings almost approaching significance ($P=0.054$, Chi-squared test) and also between participation in other pharmacy-related events such as NHS Education for Scotland (NES), other continuing education courses, pharmacy-related conferences and Community Health Partnership meetings, and attendance at branch meetings ($P=0.077$, Chi-squared test).

Figure 1 shows:



- Most pharmacists had to travel to attend meetings; both distance from work to venue ($P<0.05$, Mann Whitney test) and from home to venue ($P<0.05$, Mann Whitney test) were inversely related to attendance.

Table 1 shows the distance pharmacists stated that they would be willing to travel to attend branch meetings

Distance (miles)	n	percentage
0 - 5	98	24.3%
6 - 10	129	31.9%
11 - 15	62	15.3%
16 - 20	48	11.9%
More than 20	23	5.7%
Missing	44	10.9%

3.4 Open comments

Several opportunities for open comments on various aspects of the branches were given within the questionnaire. Various themes were identified as possibly increasing (230 comments) or decreasing (125 comments) attendance at branch meetings:

3.4.1 Interesting/relevant topics

The most common theme identified (117 comments) was the perceived relevance or interest of the meeting topic. Respondents were seldom specific but where they were they tended to focus on a desire for more educational and clinically-based topics (13); opportunities for networking (3) and debate/discussion of current pharmacy topics (5). Most respondents simply made a comment about wanting "relevant, interesting" topics.

3.4.2 Continuous professional development

Nine respondents said that the provision of "topics which can be included in CPD" or "certified CPD hours (on clinical topics)" would possibly increase their attendance, and two specifically suggested joint meetings with NES.

3.4.3 Distance to and from meeting

Sixteen respondents highlighted that a more local venue would possibly increase their attendance; a typical comment was "Just too far to travel after a full day at work". Two respondents suggested the payment of a mileage allowance.

3.4.4 Scheduling of meetings

There were a large number of responses (53) concerning the scheduling of meetings with no clear consensus emerging. Summer meetings were suggested by a few (4), including one who said "they always seem to be on cold, dark, wintry nights . . . perhaps some during the summer would help". Sixteen respondents would prefer a meeting on a different day, with one suggesting "varied evenings", while earlier starts (and therefore finishes) were also favoured (6), although a few (4) wanted meetings within work time.

3.4.5 Other commitments

Most pharmacists were juggling work and other commitments; 34 comments were made identifying these as barriers to attendance with 15 respondents specifically giving family responsibilities as the reason for their non-attendance at meetings.

3.5 Branch communication

Findings showed that among those who replied to this question (n=309), e-mail was the most favoured means of branch communication (n=130, 42.1%) with post somewhat less popular (n=90, 29.1%). A further 82 respondents (26.5%) would be happy with electronic means (ie e mail, web site) and/or post. Only 7.2% of respondents thought that their branch had a web site, with 74% unsure.

Just over half of respondents (n=220, 54.4%) remembered seeing the most recent branch programme. When asked for their opinions on branch communication, there were 13 positive comments such as "our local secretary is very good" and 30 more negative ones such as "branch communication is very scarce and does not entice me to go after a full day's work".

Sixteen pharmacists commented that better notification of meetings might possibly increase attendance. Eight specifically commented on electronic means of communication: 5 were in favour, but problems with branch web sites and internet access were identified.

3.6 Other attendees

Eight comments were received about the presence of friends/colleagues impacting on attendance; some respondents saw "other colleagues also attending meetings" as a facilitator. Interpersonal communication at meetings was perceived as poor, with 24 comments on factors such as "lack of friendliness from current members" and "clique attitude of regular attendees" acting as barriers.

3.7 Appropriate, relevant roles for the branches

The study sought to explore pharmacists' views on appropriate, relevant roles for a local branch. Various statements regarding possible roles were derived from the current Branch Byelaws ⁽¹⁾.

Table 2 shows pharmacists' levels of agreement or disagreement with these statements (n=404).

	Strongly agree n= (%)	Agree n= (%)	Unsure n= (%)	Disagree n= (%)	Strongly disagree n= (%)	Missing n= (%)
Provides contact between members and the Scottish Pharmacy Board	52 (12.9)	186 (46.0)	119 (29.5)	16 (4.0)	5 (1.2)	26 (6.4)
Promotes professional standards	58 (14.4)	205 (50.7)	79 (19.6)	30 (7.4)	5 (1.2)	27 (6.7)
Provides opportunities for continuous professional development	57 (14.1)	199 (49.3)	87 (21.5)	37 (9.2)	2 (0.5)	22 (5.4)
Serves as a forum for exchange of ideas and experiences within the profession	60 (14.9)	215 (53.2)	79 (19.6)	25 (6.2)	2 (0.5)	23 (5.7)
Promotes inter-professional working	35 (8.7)	148 (36.6)	143 (35.4)	46 (11.4)	8 (2.0)	24 (5.9)
Organises social functions	17 (4.2)	156 (38.6)	145 (35.9)	52 (12.9)	10 (2.5)	24 (5.9)

It can be seen that participants held largely positive views about these roles.

3.8 Pharmacists' views on branch meetings

The final section of the questionnaire was designed to examine pharmacists' feelings about attending branch meetings, and the factors affecting these feelings. Various statements were derived by the authors from the Society Byelaws ⁽¹⁾

Table 3 shows pharmacists' levels of agreement or disagreement with these statements (n=404).

	Strongly agree n= (%)	Agree n= (%)	Unsure n= (%)	Disagree n= (%)	Strongly disagree n= (%)	Missing n= (%)
Branches could be more proactive in encouraging attendance	78 (19.3)	201 (49.8)	61 (15.1)	31 (7.7)	2 (0.5)	31 (7.7)
Yearly certificates of attendance would encourage me to participate	26 (6.4)	93 (23.0)	66 (16.3)	135 (33.4)	56 (13.9)	28 (6.9)
Joint meetings with other pharmacy-related organisations eg NES would encourage me to attend	58 (14.4)	229 (56.7)	58 (14.4)	26 (6.4)	7 (1.7)	26 (6.4)
I feel my branch programme currently meets my needs	4 (1.0)	36 (8.9)	156 (38.6)	129 (31.9)	44 (10.9)	35 (8.7)
Branch meetings have no relevance to my professional practice	17 (4.2)	89 (22.0)	113 (28.0)	126 (31.2)	21 (5.2)	38 (9.4)
Branch meetings should provide an opportunity to debate current pharmaceutical issues	49 (12.1)	268 (66.3)	44 (10.9)	11 (2.7)	2 (0.5)	30 (7.4)
I am more likely to attend meetings related to current issues in pharmacy eg proposed increase in fees, formation of body akin to Royal College	50 (12.4)	186 (46.0)	87 (21.5)	52 (12.9)	3 (0.7)	26 (6.4)
I am more likely to attend non pharmacy-related meetings eg social functions	3 (0.7)	47 (11.6)	82 (20.3)	189 (46.8)	57 (14.1)	26 (6.4)
I would be interested in electronic methods of communication eg discussion forum	44 (10.9)	140 (34.7)	86 (21.3)	89 (22.0)	15 (3.7)	30 (7.4)

Branch meetings should be open to non-pharmacists	8 (2.0)	94 (23.3)	124 (30.7)	109 (27.0)	35 (8.7)	34 (8.4)
I feel that my educational and networking needs are met through other sources	46 (11.4)	201 (49.8)	82 (20.3)	45 (11.1)	0	30 (7.4)
I am more likely to attend meetings about clinical topics	68 (16.8)	192 (47.5)	63 (15.6)	45 (11.1)	7 (1.7)	29 (7.2)

3.9 Open comments

In addition to being asked to rate their level of agreement with the above statements, respondents were also offered the opportunity to make additional comments or suggestions on the role of their branch or branches in general. One hundred and seventy nine comments were made, which can be broadly categorised as follows:

3.9.1 Professional and networking forum

Thirty three comments were made identifying this as an appropriate function for the branch network. Representative comments included "I think that providing opportunities for pharmacists (especially from different sectors) to get to know each other is important. They should actually enable that. Meetings are daunting if you know no-one" and "provide forum for interactive discussion on topical issues".

3.9.2 Conduit for communication with RPSGB

Fifteen comments were made regarding the branches' role as a conduit for communication to and from Society headquarters. These included "communicating the work of the Society to ordinary members" and "forum for discussion and feedback on RPSGB issues eg recent increase in fees."

Twelve comments were made which were hostile towards the RPSGB; typical was "Currently a reflection of how I view the Society – does not value nor work for its members!"

3.9.3 Education

Nine respondents saw the provision of education as an appropriate role for branches. One commented "information source...good practice, peer review" although another noted that "NES provides F.E." The provision of 'accredited' CPD was mentioned by two respondents: "To provide opportunities to learn/train & therefore gain accredited CPD hours- not just a 'talking group/ social gathering'"

3.9.4 Training relevance

Twelve respondents reported that they felt that the availability of training provided by NHS Education for Scotland (NES) and others impacted on branch attendance: "I could be wrong here but after attending my NES meetings and other relevant courses about pharmaceutical practice, branch meetings come low on list of priorities."

One respondent suggested "NES meetings could be tied together and make for a better use of valuable time".

3.9.5 Alternative structure for local support

Fifteen respondents identified a desire for a different format for branch meetings: "Needs to be completely changed with modern venues/ways of working/young leadership." Discussion forums (2), video conferencing (1), web (1) and presentations available on-line (1) were all suggested.

Four comments in favour of multi-disciplinary and/or inter-professional meetings were made.

3.9.6 Barriers to and facilitators of attendance

Seventeen respondents again highlighted the relevance or otherwise of meetings as a factor in attendance; a typical comment was "I don't feel that they are particularly relevant or helpful to me."

Other barriers included family and other commitments (14), travelling distances involved (10) and the perceived unfriendliness of meetings (10). Difficulties with communications from

branches (4) were also mentioned, and 5 respondents reported that their branch was moribund or inactive.

Comments included "Pressure of work and life balance plays a big part in my decision to attend or not" and "I used to attend these meetings but never felt welcome or informed ie structure etc."

Rotation of venue (1) and day of meeting (1) were suggested as ways of facilitating attendance.

4 Comment

As far as is known to the researchers, this is the first Scotland-wide study of members' views, experiences and attitudes towards the branches of the Society and their functions. Care is needed in interpreting the findings given the response rate of 40.4% which limits the generalisability of the findings. In addition no attempt was made to check the validity or reliability of data, which may have been influenced by recall bias. Respondents' demographics were found broadly to match those of UK ⁽²⁾, ⁽³⁾ or where specifically available, Scottish pharmacists ⁽²⁾

Members held somewhat positive views about branch roles but the vast majority do not attend; this applies across all sectors but particularly those working for large multiples.

The main barrier to attendance was a perceived lack of relevance to members' professional needs; others included family commitments, distance to meetings, long working hours and a lack of friendliness at meetings. The main facilitator of attendance was professionally relevant topics. Table 3 shows that debates on current pharmaceutical issues (78.4%); meetings related to current issues in pharmacy (58.4%) and clinically focused meetings (64.3%) would be welcomed.

Although respondents cited barriers to attending meetings, large numbers (n=307, 75.9%) attend NHS Education for Scotland (NES) Pharmacy events, suggesting that such barriers can be overcome. Joint meetings with organisations such as NES Pharmacy would be favoured by 71.1%.

Our study was carried out at a time of uncertainty within the profession; the data collection period coincided with the announcement of a substantial rise in retention fees. This may have coloured respondents' views, but the fact that so few attended any meetings at all within the previous year suggests that members' lack of engagement with their local branches is more long-standing.

Communication between the branches and members can be problematic, although the fact that three Scottish branches are currently inactive may have contributed to the number of respondents who claim to receive no communication from their branch. Branch web sites could be used to publicise meetings, display presentations and facilitate discussion forums. It may be that establishing an additional/alternative network would help overcome barriers such as lack of time and distance from meetings.

The perception that branch meetings are "unfriendly" and "like a middle-aged members' club" needs to be addressed; the message from this survey is that in addition to providing "interesting, relevant topics" the branches need to be more pro-active and welcoming in order to encourage attendance. Members' lack of engagement with the branches is a problem for the Society, and is likely to continue to be so for whichever body is established to represent pharmacists professionally in the future. However, it may be that the member who asked for "live football and free beer" will never be enticed along to meetings. . .

5 References

- (1) Royal Pharmaceutical Society of Great Britain. *Byelaws*. London: RPSGB; 2007 [updated 4th June; cited 2008 June 18th]. Available: <http://www.rpsgb.org/pdfs/byelaws.pdf>.
- (2) Hassell K, Seston L and Eden M. *Pharmacy workforce census 2005*. Manchester: School of Pharmacy, University of Manchester; 2006.
- (3) Seston E, Hassell K, Schafheutle E. Workforce update - joiners, leavers and practising and non-practising pharmacists on the 2007 Register. *Pharmaceutical Journal*. 2007; 279(7482):691-693.

Appendix 1

A cross sectional survey of Scottish pharmacists' views, experiences and attitudes towards the branches of the Royal Pharmaceutical Society of Great Britain and their functions.

Section I - Firstly, some questions about you

Please tick (✓) the appropriate box or write in the space provided.

1. What sex are you?

- female male

2. What is your age?

- <25 years 25-34 years 35-44 years 45-54 years >54 years

3. How many years have you been registered as a pharmacist?

- <6 years 6-10 years 11-15 years 16-20 years >20 years

4. Are you a practising pharmacist?

- yes no

If yes, how many hours per week do you usually work as a pharmacist?

- < 10 hours 10- 19 hours 20-29 hours 30-39 hours >39 hours

5. In which branch of pharmacy do you mainly work?

Community large multiple (more than 30 pharmacies)

small multiple (5 – 30 branches)

small independent (1 – 4 branches)

Hospital teaching hospital

community hospital

Primary care

Other – please state _____

6. Do you have any of the following pharmacy related post-graduate qualifications? (tick all that apply)

- PgCert PgDip MSc MPhil PhD

7. Are you registered as a prescriber with the Royal Pharmaceutical Society of Great Britain (RPSGB)?

- yes no

8. Are you, or have you been in the last 5 years, a RPSGB pre-registration tutor?

- yes no

9. Are you, or have you been in the last 5 years a RPSGB branch committee member or office bearer?

- yes no

10. How many hours of continuing professional development have you completed in the last 12 months?

- < 6 6-10 11-15
 16-20 21-25 26-30 >30

11. Which of the following do you currently participate in during the last 12 months?

- | | | | |
|---------------------------------------|------------------------------------|------------------------------------|--------------------------------|
| NHS Education Scotland (NES) courses | <input type="checkbox"/> regularly | <input type="checkbox"/> sometimes | <input type="checkbox"/> never |
| Other continuing education events | <input type="checkbox"/> regularly | <input type="checkbox"/> sometimes | <input type="checkbox"/> never |
| Pharmacy-related conferences | <input type="checkbox"/> regularly | <input type="checkbox"/> sometimes | <input type="checkbox"/> never |
| Community Health Partnership meetings | <input type="checkbox"/> regularly | <input type="checkbox"/> sometimes | <input type="checkbox"/> never |

12. Please tick which ONE of the following best describes you in relation to your professional practice.

Venturesome and willing to take risks in relation to new ways of working	<input type="checkbox"/>
Serve as a role model for others in relation to new ways of working	<input type="checkbox"/>
Deliberate for some time before adopting new ways of working	<input type="checkbox"/>
Caution in relation to new ways of working; tend to change once most peers have done so	<input type="checkbox"/>
Resist new ways of working	<input type="checkbox"/>

Section II - The questions in this section relate to your local RSPGB branch

- 1. What is the name of your local RPSGB branch?** _____ don't know
 Who is the Chairman of this branch? _____ don't know
 Who is the Secretary? _____ don't know

2. How many times each year does the branch meet?

- does not meet 1-3 times 4-6 times > 6 times unsure

Do you feel that this number is?

- too many about right too few not sure

Do you remember seeing the most recent branch programme?

- yes no unsure

3. How many branch meetings did you attend last year?

- all most some none

4. When does your branch meet?

- mainly winter mainly summer spread throughout year unsure

5. Approximately how many miles is it

from your home to the venue of your branch meetings? _____

from your place of work to the venue of your branch meetings? _____

6. How far would you be willing to travel to attend branch meetings?

- 0-5 miles 6-10 miles 11-15 miles 16-20 miles > 20 miles

7. Are refreshments available at meetings?

yes no unsure

8. Would you be more likely to attend if refreshments including food were available at your branch meetings?

yes no unsure

9. Please state anything else that would possibly increase your attendance at branch meetings

10. Please state anything else that would possibly reduce your attendance at branch meetings

Section III - The questions in this section are about communications from your local RSPGB branch

1. How is branch information communicated to you? (tick all that apply)

telephone post e-mail Pharmaceutical Journal
 website newsletter unsure none of these

2. Does your branch have a website?

yes no **(go to question 7)** unsure **(go to question 7)**

3. If yes, how often do you look at it?

daily weekly monthly yearly never

4. What information is available on the branch website?

branch history news announcements minutes of meeting
 programme presentations contact details links
 other – please state _____

5. Please state any other information that you would like on the website

6. Please rate your agreement or disagreement with each of the following aspects of the website

Easy to navigate: agree unsure disagree
Interesting: agree unsure disagree
Relevant to me: agree unsure disagree
Up to date: agree unsure disagree

7. In general, how would you like the branch to communicate with you?

8. Please give any other comments you have about branch communication

Section IV – The questions in this section are about the role(s) of the branch.

1. Please rate your level of agreement or disagreement as to whether each of the following is an appropriate, relevant role of the branch.

	strongly agree	agree	unsure	disagree	strongly disagree
Provides contact between members and the Scottish Pharmacy Board	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Promotes professional standards	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Provides opportunities for continuous professional development	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Serves as a forum for exchange of ideas and experiences within the profession	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Promotes inter-professional working	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Organises social functions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

2. Please provide any other comments as to what you think the role of the branch should be

Section V

1. We would like to find out about how you feel about attending branch meetings and any factors that might affect this.

Please rate your agreement with the following statements on the same scale as before

	strongly agree	agree	unsure	disagree	strongly disagree
Branches could be more proactive in encouraging attendance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Yearly certificates of attendance would encourage me to participate	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Joint meetings with other pharmacy-related organisations eg NES would encourage me to attend	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I feel my branch programme currently meets my needs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Branch meetings have no relevance to my professional practice	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Branch meetings should provide an opportunity to debate current pharmaceutical issues	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I am more likely to attend meetings related to current issues in pharmacy eg proposed increase in fees, formation of body akin to Royal College	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I am more likely to attend non pharmacy-related meetings eg social functions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I would be interested in electronic methods of communication eg discussion forum	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Branch meetings should be open to non-pharmacists	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I feel that my educational and networking needs are met through other sources	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I am more likely to attend meetings about clinical topics	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

2. Do you have any other comments or suggestions about your branch, or branches in general?