



**ROYAL  
PHARMACEUTICAL  
SOCIETY**

## **Assembly Meeting**

To be held at 9.00 am to 16.00 pm on 17th July at 66 East Smithfield

### **Agenda - Open Business**

**1. Welcome to Assembly members & apologies for absence 9.00**

**2. Items for Noting 9.00 – 9.05**

***Assembly Members are advised that no discussion will be held on these items at the meeting unless a member of Assembly notifies the Chief Executive 48 hours in advance of the meeting of any point they wish to raise***

- a) Code of Conduct & Remit of Assembly and COG
- b) Declarations of interest
- c) Minutes of the Open Business Assembly Meeting 27<sup>th</sup> March (for noting & approval)
- d) National Pharmacy Board Reports
- e) President's Report
- f) Treasurer's Report
- g) Science & Research – to note the minutes of the Science & Research Committee 15<sup>th</sup> April
- h) Education & Standards – to note the minutes of the Education & Standards Committee 22nd May
- i) Education & Membership update
- j) Inclusion & Diversity update
- k) Schedule of Assembly meetings 2025
- l) Panel of Fellows list of Fellows appointed in May

**3. Matters arising from the Open Business minutes not specifically included elsewhere on the agenda 9.05 – 9.10**

None

**4. UKPPLAB 9.10 – 9.40**

To welcome Sir Hugh Taylor and receive an update on work of the Board to date  
*President*

**5. Constitution & Governance Review 9.40 – 9.50**

To receive an update on next steps  
*Chief Executive*

**6. International 9.50 – 10.30**

- i) To approve the draft International Strategy (paper to follow)
- ii) To discuss RPS representation on FIP CPS ExCo  
*CEO/Director for Scotland*

**7. Pharmacist Support 10.30 – 11.00**

To receive an update on the new Memorandum of Understanding & collaborative working with Pharmacist Support  
*AD for Membership/CEO Pharmacist Support*



## Assembly Meeting 17<sup>th</sup> July 2024 - OPEN BUSINESS

8. Any other business 11.00 – 11.10  
*Any other items of business to be notified to the Chief Executive 48 hours before the meeting*
9. Date of next meeting 11.10  
To note the dates of the Assembly Working Day and Meeting, 19<sup>th</sup> & 20<sup>th</sup> November

**BREAK 11.10 – 11.20**



**ROLE OF ASSEMBLY  
(Regulations)****4.0 ASSEMBLY****4.1 Function**

The Assembly is the governing body of the Society. Its overarching purpose is to ensure that the Society is led and governed effectively in pursuit of its Charter objectives, and to provide full fiduciary oversight and budgetary control. It maintains the overall strategic direction on all GB-wide issues and is responsible for the sound financial management of the Society.

Its main tasks are to:

- agree the values, tone and ethos of the Society
- enhance and protect the reputation of the Society and the profession
- agree the overall strategic direction and top level objectives of the Society, including European and other international dimensions
- allocate resources
- delegate authority to other governance bodies
- appoint, direct and set broad objectives for the Chief Executive
- monitor performance of Chief Executive and ensure conformance
- account to the membership
- oversee membership critical issues

**ROLE OF CHAIRS & OFFICERS' GROUP  
(Regulations Appendix H)**

The Chairs' and Officers' Group (COG) exists to provide a mechanism for making decisions on major issues on behalf of the Assembly that require urgent action and that do not fall within the delegated authorities of other governance bodies with appropriate meeting dates and cannot wait for a decision at the next Assembly meeting.

COG is authorised by Assembly to:

- appoint the Chair and members of the Audit and Risk Committee
- deal with issues arising which require an urgent response that do not fall within the delegated authorities of other governance bodies. Where this concerns new policy, actions would be subsequently ratified by the Assembly as appropriate
- deal with any specific matters delegated by the Assembly

Any actions/decisions agreed by COG should be communicated immediately to the members of the Assembly, unless precluded from doing so by confidentiality. Minutes of meetings will be included in the confidential business of the next Assembly meeting and any decisions that need to be ratified by Assembly members will be done so at that time.



## **CODE OF CONDUCT FOR MEMBERS OF THE SOCIETY (Regulations)**

### **APPENDIX A - CODE OF CONDUCT**

Assembly may create, and from time to time amend or rescind, a Code of Conduct to be observed by all members of the Society. Breaches of the Code may, upon proper investigation under the process set out in the appropriate Regulations, lead to a Disciplinary Panel hearing which may, in turn, depending on the nature of the breach, ultimately lead to expulsion from the Society.

#### **a) All Members**

Being a member of the RPS is a mark of professionalism and members, as ambassadors of the Society, should do nothing that might detract from the high standing of the profession. This includes any aspect of a member's personal conduct which could have a negative impact upon the profession. On admission to, and annually on renewal of membership, all members must therefore:

- be in good standing professionally, including with the Society and any other professional body or regulator of which they are a member or registrant
- conduct themselves in a manner that upholds and enhances the reputation of the Society
- further the interests of and maintain the dignity and welfare of the Society and the profession
- exercise their professional skills and judgement to the best of their ability, discharge their professional responsibilities with integrity and do all in their power to ensure that their professional activities do not put the health and safety of others at risk
- when called upon to give a professional opinion, do so with objectivity and reliability
- be truthful and honest in dealings with clients, colleagues, other professionals and all they come into contact with in the course of their duties
- never engage in any activity that will impair the dignity, reputation or welfare of the Society, fellow members or their profession
- never knowingly engage in any corrupt or unethical practice
- not implicate the Society, through direct reference or use of membership status, in any statement that may be construed as defamatory, discriminatory, libellous, offensive, slanderous, subversive or otherwise damaging to the Society
- if convicted of a criminal or civil offence anywhere in the world inform the Society promptly, and provide such information concerning the conviction as the Institution may require. NB- this does not include Fixed Penalty Notice offences.
- observe the Policies of the Society
- comply with the Society's Regulations and all applicable laws



## **Conduct**

If a member generally becomes aware of, or has reasonable grounds for believing, that another member is engaged in or has engaged in conduct which is in breach of the Regulations and/or Code of Conduct of the Society, they shall inform the Society in writing of that belief, but shall not maliciously or recklessly injure or attempt to injure, directly or indirectly, the reputation, practice, employment or livelihood of another member.

Complaints about the professional practice, performance or conduct of a member should be referred to the General Pharmaceutical Council, and any action by the Society may be postponed until the outcome of the Council's proceedings is known.

If the complaint is summarily dismissed by the General Pharmaceutical Council, the procedures set out in the Conduct Scheme for Members will be followed.

If the complaint is the subject of proceedings before a court or other regulatory authority, any action by the Society shall be postponed until the outcome of those proceedings is known, but is not obliged to do so. The Society is entitled to conduct its own investigations and implement its own decisions in accordance with the Society's Regulations and conduct procedures independently from the General Pharmaceutical Council, courts or any other authority.

In exceptional circumstances, the Society may take action in advance of a decision of a court or regulatory authority, in which case the complaint shall be referred to the Chairman of the Membership Committee, and the procedures set out in the Conduct Scheme for Members will be followed.

## **Bullying or harassment**

The Society aims to create an environment which respects the dignity of all individuals, including but not limited to individuals who are Members, members or employees, those who provide services to the Society or conduct business on behalf of the Society or who come into contact with anyone connected to the Society.

Bullying, harassment, or victimisation of any will not be tolerated.

Bullying is offensive, intimidating, malicious or insulting behaviour, and/or misuse or an abuse or misuse of power that is meant to undermine, humiliate or injure the person on the receiving end.

Harassment is any unwanted physical, verbal or non-verbal conduct which has the purpose of violating another person's dignity or creating an intimidating, hostile, degrading, humiliating or offensive environment for another person, or is reasonably considered by that person to have the effect of violating their dignity or creating such an environment, even if this effect was not intended by the person responsible for the conduct. A single incident or a pattern of multiple incidents of this type of behaviour can amount to harassment and/or bullying. It also includes treating someone less favourably because they have submitted or refused to submit to such behaviour in the past.

Any of these behaviours will always be viewed extremely seriously and may result in disciplinary action being taken including, or where appropriate, summary dismissal, removal from office, termination of a contract to provide services or membership of the Society.



## **b) Additional Code for Governance Body Members**

In addition to observing the Code of Conduct for Members of the Society, members elected or appointed to the Assembly, National Pharmacy Boards or any other governance body reporting to the Assembly shall:

- observe the Code of Conduct for Governance Body Members
- act collectively in discharging the functions of the relevant governance body, abiding by and supporting any decisions made
- respect the skills, roles and dignity of staff and other members participating in governance
- not exploit their position as a member of a governance body for personal or business gain, financial or otherwise

## **Duties**

All Assembly/Board members and other governance body members are expected to perform their duties (whether statutory, fiduciary or common law) faithfully, diligently and to a standard commensurate with the functions of the role and their knowledge, skills and experience. They shall also have regard to the general duties of directors including the duty to act, in good faith, in such a way that promotes the success of the Society for the benefit of its members as a whole.

Governance body members shall take due note of any legal advice provided to the Society. Although the ultimate decision in a matter will rest with the relevant governance body or post holder, such a decision should be informed by the legal advice provided to the Society and not taken unilaterally.

Assembly and Board Members are not authorised on behalf of the Society to enter into any legal agreements or other commitments or contracts on behalf of the Society. Only in exceptional circumstances should an elected member be specifically authorised to sign an agreement on the Society's behalf, and in those circumstances instructions should be provided by the Chief Executive to the Society's Legal team.

## **Collegiality**

Any governance body member, whether they dissent, abstain or are absent from the making of a decision by the relevant governance body, accepts the majority decision and is bound by it. Decisions taken collectively by any committee/group/governing body of which the member is a part must be fully respected and the principle of "collective responsibility" for such decisions observed. A governance body member can require their dissent to be recorded, but this does not absolve them from collective responsibility.

Although governance body members may legitimately disagree with the Society leadership, direction, policy and decision-making, any comments made about such policies/decisions should be made in a way which makes it clear that they are the member's personal views and not be made in such a manner as to bring the reputation of the Society into disrepute.

If, after weighing carefully the potential effects on the Society's wider objectives and reputation, a governance body member considers that a matter is of such importance that they feel compelled publicly to oppose a decision of the particular governance body, the member should if possible inform the relevant Chair, or in the case of a Board Chair, the President, in advance. If this is not possible the relevant Chair, or in the case of a Board Chair, the President, should be informed as soon as possible after. The governance body member may then express their personal views on the



matter but, in so doing, must first explain the relevant governance body's policy and the reason(s) for the governance body arriving at this policy.

It is acceptable for a member to dissent from a governance body decision from a moral/conscience perspective but they should fully explain the reasons for doing so to the Assembly.

### **Confidentiality**

Governance members agree to keep all Confidential Information confidential and not to use or disclose it, or make any statement which might risk the disclosure of confidential information, except as authorised or required in connection with their appointment and to use their best endeavours to prevent the use or disclosure of it by any other person. This restriction will cease to apply to information which becomes public knowledge otherwise than through any unauthorised disclosure or other breach.

Governance members accept that, with the exception of personal journals or diaries, all confidential records in any medium (whether written, computer readable or otherwise) including accounts, documents, drawings and private notes about the Society and its activities and all copies and extracts of them made or acquired in the course of their appointment will be:

- the Society 's property
- used for the Society 's purpose only
- returned to the Society at any time on demand
- returned to the Society or destroyed without demand upon the termination of your appointment

The Society makes no claim to personal journals or diaries, however members agree to safeguard, using reasonable security measures, any personal journal or diary that contains sensitive or confidential Society information. Members further guarantee that upon the termination of their appointment, they will redact any highly sensitive data that may be recorded in any personal journal or diary. The Society accepts this personal guarantee on an honour basis, made in good faith, and will not seek at any time to see an individual's personal journal or diary.

'Confidential Information' means information (in whatever form and howsoever held) relating to the business, products, affairs and finances of the Society or of any Group Company or joint venture for the time being confidential to it or to them, and trade secrets (including, without limitation, technical data and know-how) relating to the business of the Society or of any Group Company or joint venture or of any of its or their suppliers, clients or customers including in particular (by way of example only and without limitation):

- terms of business with clients/customers and prices charged
- the identity of the Society or any Group Company's clients/customers and members
- the subscriber database
- specific contact details and terms of business with clients, customers, their requirements and prices charged
- draft publications and publications
- business plans, strategies (including pricing strategies) marketing plans and sales forecasts
- confidential management and financial information and data, results and forecasts (including draft, provisional and final figures), including dividend information, turnover and stock levels, profits and profit margins



- confidential financial information and data relating to the Society's and any Group Company's clients/customers
- information relating to industry knowledge and research, research activities, inventions, secret processes, designs, formulae and product lines
- any information which is treated as confidential or which you are told or ought reasonably to know is confidential
- any information which has been given to the Society or any Group Company in confidence by members, customers, clients, suppliers or other persons, or that you created, developed, received or obtained in connection with your providing the services, whether or not such information (if in anything other than oral form) is marked confidential

This shall not prevent any individual from disclosing information which they are entitled to disclose under the Public Interest Disclosure Act 1998, provided that the disclosure is made in accordance with the provisions of that Act.

### **Intellectual Property**

Governance Members agree to promptly disclose to the Society all work and all Intellectual Property arising from any Work provided by them.

Governance Members agree to assign (by way of present and future assignment) with full title guarantee all Intellectual Property in any Work to the Society (or any Group Company designated by the Society) including (with effect from their creation) all future rights and waive such rights (including moral rights) as are not capable of being assigned.

Governance Members will at the request and reasonable expense of the Society:

- supply all information, data, drawings, software or other materials and assistance as may be required to enable the Society (or any Group Company) to fully exploit any Intellectual Property and Work to its best advantage as determined by the Society
- execute all documents and do all things necessary or desirable to vest ownership of Intellectual Property in any Work or otherwise belonging to the Society in the Society (or any Group Company) and/or to obtain patent or other protection for the Intellectual Property in such parts of the world as the Society (or any Group Company) may specify.

'Intellectual Property' means copyright, rights in inventions, patents, know-how, trade secrets, trademarks and trade names, service marks, design rights, rights in get-up, database rights and rights in data, semiconductor chip topography rights, mask works, utility models, domain names and all similar rights and, in each case: (i) whether registered or not, (ii) including any applications to protect or register such rights, (iii) including all renewals and extensions of such rights or applications, (iv) whether vested, contingent or future and (v) wherever existing;

'Work' means any information, data, drawings, software or other materials or work created or provided by you (either alone or jointly with others) arising from this Agreement or any duties assigned to you by the Society (or any Group Company).

### **Return of RPS Property**



At the end of their term of office, however arising, or at any time at the Society's request, governance members shall immediately return to the Society or destroy all documents, records, papers or other property belonging to the Society or any Group Company which may be in their possession or under their control, and which relate in any way to the Society's or of any Group Company or joint venture or any of its associations business affairs and shall not retain any copies thereof. This requirement shall not apply to a single copy of confidential information kept for legal, accounting or professional purposes which members warrant to keep secure in exchange for reasonable personal use. Members may be asked to certify in writing that they have complied with these requirements.

### **Conduct**

A member of a governance body must inform the Chief Executive if he/she is subject to proceedings (but excluding any preliminary investigations) before a regulatory or licensing body, or has been charged with any criminal offence.

Where a member is subject to such proceedings or has been charged with any criminal offence the Chief Executive will put to the Assembly a resolution calling for the suspension of that member from office and from any governance body pending the outcome of the proceedings against the member under the relevant procedures in the Regulations and Conduct Scheme for Members. If the conclusion/outcome of the proceedings is that the member is not guilty of charges against him a resolution will be put to the Assembly for the suspension from office or governance to be lifted with immediate effect.

Where a member has been convicted of an offence which may be relevant to his membership of a governance body, then the matter will be referred to the Assembly who will deal with the matter in accordance with the relevant procedures as set out in the Regulations.



**Assembly Meeting July 2024****DECLARATION OF INTERESTS****Adebayo Adegbite**

- Self-employed Locum Pharmacist Director of Amados Limited.
- Locum Pharmacist -various pharmacies including Pharma Alert 24/Integrated Care 24
- PDA Union South East Regional Committee Locum Representative
- Wife - Locum Pharmacist Director -Fabb Solutions Limited
- Member of UK Black Pharmacists Association
- Member of The Pharmacist Co-Operative
- Member of the Primary Care Pharmacy Association
- Volunteer Fifth Sense charity
- NPUK member
- FIP member

**Claire Anderson**

- Professor of Social Pharmacy, School of Pharmacy, University of Nottingham
- Trustee Commonwealth Pharmacy Association
- Member, UKPPLAB

**Danny Bartlett**

- Lead Pharmacist, Horsham Central PCN (Alliance for better care federation)
- Senior Lecturer Medicines Use, University of Brighton
- Coach for Sussex Training Hub
- Member PCPA
- HEE Interprofessional and Education Fellow
- Contributor Pharmaceutical Journal
- Contributor Chemist & Druggist
- Clinical contributor Clinical Pharmacist Solutions
- Adhoc guest clinical speaker CPPE, Bayer, HEE (GP training)
- Member PDA
- Adhoc consultancy and clinical services

**Jonathan Burton**

- Community Pharmacist & co-owner, Right Medicine Pharmacy – 2000 onwards
- Previous SPB Board Member, RPS, (incl. terms as Chair and Vice-Chair) – 2012-2021
- Previous Assembly Member, Royal Pharmaceutical Society – 2019-2021
- Member, Pharmacy Magazine Editorial Advisory Panel - 2023 –
- Member, Scottish Pharmacy Board – 2024
- Co-Editor of Pharmaceutical Press textbook 'Pharmacy management of Long Term Medical Conditions
- Assist on sessional basis with workshops & OSCE assessment for Univ. of Strathclyde Independent Prescribing course



**Ciara Duffy**

- Quality Manager/Qualified Person at Novartis
- Directorship - Duffy Quality Pharma Consulting
- Sister – National Lead Pharmacist Interface
- Sister – HSE Pharmacist
- Brother in law – Regulatory Pharmacist Uniphar

**Ruth Edwards**

- University of Wolverhampton – substantive employment
- Associate & Accreditation Team Leader – GPhC
- Pharmaceutical Press Author
- Royal College of Surgeons, Ireland – external examiner
- PDA member

**Brendon Jiang**

- Senior Clinical Pharmacist, NORA PCN
- Primary Care Network Clinical Lead Pharmacist for Oxfordshire, OCCG/BOB ICS
- Medicines and Prescribing Associate, NICE
- Committee member of the Primary Care Pharmacy Association
- Member of the Guild of Healthcare Pharmacists
- Superintendent pharmacist of Wychwood Pharmacy.
- Consultancy on pharmacy development– Oxfordshire Training Hub.
- Member Unite Union
- Consultancy work for Haleon

**Geraldine McCaffrey**

- Principal Pharmacist at Betsi Cadwaladr University Health Board
- Member of the Delivery Board for Pharmacy: Delivering a Healthier Wales
- Vice Chair, Pharmacy Research Wales Group
- Member, National Pharmacogenomics Group (Wales)
- Member of Unite/Guild of Hospital Pharmacists
- Member of UKCPA

**Gino Martini**

- PHTA Ltd – main employer
- GPhC – Team Member Accreditation Programme
- Leucillin Advisor – stabilised hypochlorous acid provider
- Director, PHTA Ltd
- Director, Lakes Biosciences Ltd
- Director, Lupa Medical Ltd
- Visiting Professor at King's College London, Anglia Ruskin, Reading and Bradford
- Honorary Professor at University of Birmingham
- Court Member of the Worshipful Society of Apothecaries
- was on the working group for the UK Commission for the Profession of Pharmacy



**Erutase Oputu**

- NHS Kent & Medway ICB
- Member of UK Black Pharmacists Association
- Member of UK Clinical Pharmacists Association
- Member of the Guild of Healthcare Pharmacists
- Pharmacy Research UK Trustee
- Knockholt Mansions Residents' Trustee
- Member of Inclusive Pharmacy Practice Advisory Board, NHS England
- Brother works at Astra Zeneca PLC

**Matthew Prior**

- Deputy Director of Pharmacy – University Hospitals Coventry & Warwickshire
- Deputy Chair of RPS Hospital Expert Advisory Group – until taking position with the RPS EPB
- Committee member – Coventry & Warwickshire Area Prescribing Committee
- Wife works for Boots as a category manager within healthcare retail
- Member of the PDA

**Eleri Schiavone**

- Welsh Health Specialised Services Committee - NHS Wales hosted by CTMUHB
- Executive Board Member: Pharmacy Delivering a Healthier Wales
- Board Member: All Wales Medicines Strategy Group
- Member of All Wales Medicines Strategy Group Steering Committee
- Member of the Welsh Pharmacy Board

**Lynne Smith**

- Royal College of Anaesthetics: Lay Member of Anaesthesia Clinical Services Accreditation Team and lay member of committees and groups including the Intercollegiate Advisory Committee in Dentistry
- Health Care Professions Council: lay member of Fitness to Practice Panels
- Volunteer and mentor for schools programme for an international development charity

**Audrey Thompson**

- Member NHSGGC pharmacy practices committee 2024
- Member Scottish Practice Pharmacist and Prescribing Advisers' Leadership Group 2015 – 2023
- Member of Unite



**Minutes of Assembly Meeting held on 27<sup>th</sup> March 2024 at 66 East Smithfield**

Present: Claire Anderson (CA) - Chair, Andrew Carruthers (AC), Ciara Duffy (CD) – via vc, Ruth Edwards (RE), Thorrun Govind (TG) – via vc, Brendan Jiang (BJ) – via vc, Alisdair Jones (AJ), Sorbi Khattak (SK), Geraldine McCaffrey (GMc), Gino Martini (GM) Tase Oputu (TO), Lynne Smith (LS), Cheryl Way (CW)

In attendance: Paul Bennett (PB), Karen Baxter (KB), Avril Chester (ACh), Rick Russell (RR), James Davies (JD), Laura Wilson (LS), Alison Douglas (AD), Melissa Dear (MD), Liz North (LN)

Observers: 2 Members attended as Observers

Apologies: Audrey Thompson (AT), Elen Jones (EJ)

Item	Paper	Notes and actions	Action by
<b>Item 01 Welcome &amp; Apologies</b>		CA welcomed everyone to the meeting. Apologies were received from Audrey Thompson & Elen Jones.	
<b>Item 02 Items for Noting</b>	24/03/ASB/02	<p>The following items were noted:</p> <ul style="list-style-type: none"> <li>a) Code of Conduct &amp; Remit of Assembly and COG</li> <li>b) Declarations of interest</li> <li>c) Minutes of the Open Business Assembly Meeting 22<sup>nd</sup> November 2023 – noted and approved</li> <li>d) National Pharmacy Board Reports</li> <li>e) President's Report</li> <li>f) Treasurer's Report</li> <li>g) Education &amp; Standards Committee minutes of meeting held on 14<sup>th</sup> February</li> </ul>	



		<p>h) Education/Professional Development/A&amp;C Update</p> <p>i) Science &amp; Research Committee minutes of meeting held on 4<sup>th</sup> February</p> <p>j) Inclusion &amp; Diversity report</p> <p>k) 2024 Events</p>	
<b>Item 03 Matters Arising</b>		None	
<b>Item 04 Constitution &amp; Governance Review</b>		<p>PB reported that good progress is being made by Firetail, the external organisation commissioned in 2023 to undertake the review. Ultimately, this will allow Assembly to consider details of the current constitution and how it might best be updated to help better address the needs of members and customers, strengthen the Society's leadership function and improve governance overall.</p> <p>Assembly members will be discussing Firetail's final recommendations further in July and the organisation will then enter a phase to engage with members and gain their views.</p>	
<b>Item 05 Luther Pendragon Comms Review</b>		<p>LN provided a recap on the outcomes of the Luther Pendragon review into member participation and communications undertaken in 2022 and noted how the outcomes of this review closely align with the findings from the Firetail governance review.</p> <p>Since the publication of the LP report the Society has been working to implement recommendations in a number of areas which could broadly be grouped under four main principles:</p> <ul style="list-style-type: none"> <li>• take a proactive &amp; considered approach</li> <li>• be more open &amp; transparent</li> <li>• build member equity &amp; agency</li> <li>• focus on collaboration &amp; be visible</li> </ul> <p>Work is still on-going but a significant step had been the appointment of LN herself as Head of Strategic Communications. Work under the four principles continued to progress and included:</p> <ul style="list-style-type: none"> <li>• a planned approach for strategic comms, including looking at how the Society talks more about what it does as much work has tended to go unnoticed and visibility is now starting to increase</li> <li>• press office operations have stepped up and the team are now taking a more proactive approach to comms on GB-wide matters</li> <li>• wider and more visible comms on policy work</li> <li>• summaries published after each Assembly meeting</li> </ul>	



		<ul style="list-style-type: none"> <li>increasing awareness of all the collaborative work the Society does eg Workforce Wellbeing, Supervision, medicines shortages</li> </ul> <p>TO agreed there was much the Society did that went unnoticed and asked how this might better be publicised to external stakeholders in particular. LN felt there was more that could be done to articulate the core areas of the Society's work especially in its professional leadership body role.</p> <p>She noted that teams were hampered somewhat at present until the full review of the organisation's technology platforms that was currently underway was completed but that could be done now on planned member comms in terms of publicising strategic work in a more proactive way and she hoped that in the next few months members would start to notice a real improvement in this area. RE noted that she had already begun to see a positive improvement even in the last couple of months and could see the difference LN had started to make in this area.</p> <p>GMc asked what was being done to attract new members and LN noted that one of projects she was currently working on was to ensure that comms elements to this work were considered at the very start of the process.</p> <p>PB thanked LN for the progress made to date and noted that it was good to see comms was now being included in projects from the very start, particularly with a number of the current major workstreams such as the Constitution &amp; Governance Review.</p> <p>He noted that LN was also taking a lead on the Society's strategic approach to International work and relationships, particularly with FIP and its Community Pharmacy Sector. Noted that Tracey Thornley, the Society's current FIP CPS endorsed member, had been very active in promoting the work done here and as a consequence RPS was not only re-engaged with FIP but was increasingly working with them. Members agreed it would be helpful if TT could be invited to the Assembly meeting in July to give an update on work in this area.</p> <p><b>ACTION – PB</b></p> <p>PB added that LW was also currently working to help finalise an International Strategy for the Society which would be brought to Assembly for approval once complete.</p> <p><b>ACTION – LW/PB</b></p> <p>Noted that the LP review had also highlighted a lack of awareness at how collaborative the RPS was in much of its work and PB added that the Society had not only published a response to the recent</p>	<p><b>PB</b></p> <p><b>LW/PB</b></p>
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		Independent Commission setting out exactly how much collaborative work was already happening but was now working collaboratively to support the new Chair of the UKPPLAB.	
<b>Item 06 UKPPLAB</b>		CA informed members that the UKPPLAB had still to hold it's first meeting but that this was now scheduled to take place on 23 <sup>rd</sup> April and would be hosted at the RPS's East Smithfield office. In the meantime CA and PB have had a number of meetings with the Board's Chair, Sir Hugh Taylor.	
<b>Item 07 National Honours</b>		<p>GM noted that an updated process to allow the Society to add its support to nominations for national honours had been introduced at the last Assembly meeting in November but, as it was clear that pharmacists got less recognition in this area than other healthcare professionals, asked how the Society might better increase awareness of this and promote to the wider membership.</p> <p>He noted that most other similar bodies tended to give prominence to this on their websites and felt RPS could do more to signpost members to the appropriate section on its website. He therefore asked if it would be possible to have a link on the homepage of the site. PB agreed this was an important item to look at and will therefore ask LN and other teams to consider how best visibility of this might be improved.</p> <p>ACTION - LN</p> <p>AD added that Christine Bond had also been undertaking work with members of the Panel of Fellows to make it easier to complete the nomination form for Fellowship.</p>	<b>LN</b>
<b>Item 08 Any Other Business</b>		None	
<b>Item 11 Date of next meeting</b>		<p>Assembly Induction Day – 16<sup>th</sup> July</p> <p>Assembly Meeting – 17<sup>th</sup> July</p>	



**ACTION SHEET – Assembly Meeting**

Item	Action	Who by	When
Item 05 International	TT to be invited to July Assembly to present on work with FIP	PB	July meeting
	Draft International Strategy to be presented to Assembly once completed	LW/PB	As soon as practical
Item 07 National Honours	Visibility of information on website to be improved	LN	As soon as practical



Title of item	Update from National Boards
<b>Open, confidential or restricted status</b>	Open
<b>Authors of paper</b>	Elen Jones, James Davies, Laura Wilson
<b>Positions in organisation</b>	Country Directors
<b>E-mail</b>	<a href="mailto:elen.jones@rpharms.com">elen.jones@rpharms.com</a> <a href="mailto:James.Davies@rpharms.com">James.Davies@rpharms.com</a> <a href="mailto:Laura.Wilson@rpharms.com">Laura.Wilson@rpharms.com</a>
<b>Purpose of item</b>	To update Assembly on the work of the National Boards for the period April – June 2024
<b>Item summary</b>	This paper provides an update on the work of the country teams in relation to policy and advocacy.
<b>Risk register items</b>	n/a
<b>RPS strategy links</b>	All
<b>Actions/decisions required of Assembly</b>	For noting



## GB activity

- Ongoing conversations with stakeholders about the current challenges around DPP's and the varying situations in each country. DPP position statement went to Boards in June for discussion and is now being updated, with a view to publication shortly. Meeting held on 26 June with stakeholders in England to discuss challenges with locating DPP and potential solutions to address local challenges.
- The Medicines Shortages Advisory group held its second meeting in June. The group have had significant engagement. This includes two RPS members webinars attended by 48 people, two roundtables the first with specialist pharmacy groups and the second with community pharmacy organisations, attendance at and feedback from RPS expert advisory group, one-to-one interviews with advisory group members and other stakeholders, patient engagement in partnership with National Voices. The engagement is beginning to reach saturation with focus turning to early drafting of the report for publication in early December.
- Developed a position statement on Gender Incongruence which went to Boards for discussion in June 2024. Updates being made incorporating the feedback.
- Work on developing a Greener Pharmacy Toolkit for Community and Hospital pharmacy in order to implement RPS sustainability policies continues. User acceptability testing and Beta testing are expected by August 2024. This will provide further opportunity for stakeholder refinement.
- We are continuing to develop the support the offer to prescribing pharmacists with the launch of a support line for prescribing support, inclusion of the RPS Competency Framework for all Prescribers, RPS DPP Competency Framework for all Prescribers and Extending Scope of Practice professional guidance within the next iteration of the Medicines, Ethics and practice Guide. A refresh of the RPS DPP Competency Framework is scheduled to start in the second half of 2024
- We submitted our response to consultations on Chief Pharmacists, review of the Human Medicines Regulations, pharmacy education and training as well as the consultation on take-home naloxone.
- The government provided its response to the hub and spoke consultation in May 2024, with the suggested legislation to allow for an independent to be able to work to a hub and spoke model. We will now look to have preliminary discussions with key stakeholders to inform next steps.
- Continue to develop position statement on Artificial Intelligence in pharmacy with feedback from EAGs and co-production with Digital Capabilities policy work
- I&D - working with the NIHR Architecture in Pharmacy group to help promote the project to pharmacy stakeholders. Hosted a successful International Women's Day event in collaboration with APTUK, BPSA,



FPLN, GHP, PToC and UKBPA. Working towards embedding equality impact assessments as BAU across membership products.

### Activity in England

- With the announcement of the election, we have promoted and shared the RPS election manifesto, first published in January.
- Parliamentary activity has been stalled due to announcement of the election, with the APPG suspended. We are working closely with parliamentary candidates and getting ready for the new government.
- Working in collaboration with community pharmacy organisations we published a joint manifesto for community pharmacy.
- We continue to lobby for the abolishment of prescription charges working closely with the Prescription Charges Coalition, issuing a letter to party leaders.
- Following our lobbying and activity with the Self Care Forum we are pleased to see the inclusion of minor ailments advice being taught in schools in the draft statutory RHSE guidance from the Department for Education. Recognising the key role of pharmacists in the treatment of ailments.
- In collaboration with the CCA, NPA and FSRH we have published a joint statement calling for the creation of a fully funded national scheme for EHC to stop the postcode lottery experienced by many women.
- In May the Health and Social Care Select Committee published the output of the inquiry into Pharmacy, which we had significant contributions into. Many of the recommendations that RPS put forward have been captured in the report.

### Activity in Scotland

- We are continuing our work to lobby for access to shared patient data for all pharmacists. We met with the project lead for digital at the Scottish Government and CPhO to discuss what pharmacy needs. We have completed a FOI request to establish the current state of play and have consulted with members about what this would mean to them. We are working on a briefing document for SG to report this information.
- We have joined a Scottish Government Remote and Rural workforce planning group to look at how the issues faced by these communities can be addressed
- We have been engaging with other professional groups and legal experts around assisted dying and the implications of the Bill as it has been presented to the Scottish Parliament for healthcare staff involved in the process. We will answer a consultation out now from the SG Health, Social Care and Sport Committee to ensure the voice of pharmacists is heard.
- We had a poster presentation at the NHS Scotland event promoting the Daffodil standards.



- Claire Anderson visited Shetland in June to see pharmacy in a remote and rural setting and discuss our Pharmacy 2030 vision document.

### Activity in Wales

- Pharmacy; Delivering a healthier Wales engagement events have continued with the number of champions signed up reaching over 250 pharmacy professionals.
- Supported and presented an award at the NHS sustainability Wales awards and conference.
- Engaging with all Wales event including, attending the Yellow card medicines safety conference and the Chief pharmacist symposium in Wales focused on environmental sustainability.
- RPS Wales team and Members were pleased to be representing at Cardiff Pride.
- Hosted a constituency community pharmacy visit for the Climate Change Minister, Huw Irranca-Davies MS/AS to showcase the great work that's happening with the expansion of services in Wales, including the common Ailment Scheme and prescribing services in community pharmacy.
- Continuing to be actively involved in the electronic prescribing developments in Wales, including membership of the primary care e-prescribing programme board.
- Provided a response to a consultation on a new mental health strategy for Wales and written evidence to the Senedd's Health Committee's inquiry into obesity.
- Joined and took part in first 2 meetings of a new Welsh Royal Colleges Child Health Collaborative and had collective engagement with the First Minister & the Children's Commissioner while continuing to engage with established joint groups on mental health and workforce issues.
- We welcomed the findings of a Public Health Wales report on the concerning rise in vaping among children and young people.
- Hosted members of the Malawi-Wales Antimicrobial Pharmacist Partnership and explored learnings and potential joint work.
- Worked with the Museum Officer to establish a historical pharmacy collection at RPS Wales.

### Consultations

- 15 consultations responded to during the period February to June 2024. All our responses can be found at <https://www.rpharms.com/recognition/working-with-government/consultation-responses/2024-consultation-responses>
- RPS will be responding to upcoming consultations on:
  - Fit note reform – call for evidence
  - NHS Constitution: 10 Year review (England) DHSC



- DoE: Review of RSHE Statutory guidance

**Tase Oputu, Chair, English Pharmacy Board**  
**Jonathan Burton, Chair, Scottish Pharmacy Board**  
**Geraldine Mccaffrey, Chair, Welsh Pharmacy Board**



## **President's report**

### **External meetings**

Paul Bennett and I have had regular meetings with David Webb (CPhO, England). We have also attended planning meetings for UK Pharmacy Professional Leadership Advisory Board (UKPPLAB) and had a couple of meetings with Sir Hugh Taylor. I attended the first two official board meetings of the UKPPLAB.

Paul Bennett and I had a very successful meeting with Paul Sinclair the FIP president. It was Paul's first visit to RPS as the FIP President and a wide-ranging discussion took place, including the importance of RPS membership to FIP, the mutual respect and warmth that exists between the two organisations, and opportunities for further collaboration on shared objectives.

I attended the first meeting of the CPhO's pharmacy research advisory group.

Wing Tan and I attended the BASHH presidents' dinner and had a lot of conversations about making PrEP available via community pharmacy. This led to a subsequent meeting with Richard Angel CEO of the Terrence Higgins Trust.

I made a visit to Shetland to see remote and rural pharmacy including Pharmacy first Plus and present about the work of the RPS at a meeting with Health Improvement Scotland.

### **Press and Publicity**

With the help of the wonderful press team, I have made numerous comments on a variety of subjects including the covid inquiry, chief pharmacist standards, whooping cough, patient safety standards, workforce wellbeing and pharmacy technicians and PGDs.

### **Conferences and external events**

I attended Pharmacy Schools Council in Nottingham.

I was a guest at the Irish Pharmacy Union conference and Dinner in Athlone, Ireland.

I attended a working dinner at School of pharmacy, UCL.

I was a guest at the Society of Apothecary's Galen awards dinner.

I was on a panel about UKPPLAB at the Clinical Pharmacy Congress.

I spoke about prescribing and ran some case studies and workshops at the Pharmaceutical Society of Australia's offshore conference in France.

### **Internal meetings**

I attended Joint working day and board meetings in Bristol, National Board Chairs' Forum, Remuneration Committee, Finance and Investment Committee (I chaired this in absence of a treasurer), Audit and Risk Committee, Education Standards Committee, Science and Research committee, HEAG and Pharmaceutical Press Board.

I have regular meetings with each of Paul Bennett, Amandeep Doll and the three country directors. Laura Wilson regularly briefs me on FIP work.

I have attended regular meetings of the Constitution and Governance Review steering group.

I have tried to attend RPS webinars and focus groups wherever possible including those on ABCD, prescribing and wellbeing.

**Claire Anderson April 2024-July 2024**



## **Treasurer's Report – March 2024**

Dear colleagues,

This will of course be my final report to Assembly as the outgoing Treasurer. I'd like to take this opportunity to thank you all for your support over the past three years, and for your continued efforts. I know I will be leaving our finances in the safe hands of Rick and his team, as well as the new Treasurer and FIC.

This report is based on financial data up to and including April 2024.

### **Overview**

RPS continues to be in a strong position financially owing to the accumulation of surplus over the past few years. It is reasonably safe to say however that the trend is unlikely to continue and increasing cost pressures, as well as the need to invest in the business, are likely to put our budget under more strain going forwards. It is important to use the opportunity to ensure we invest sensibly in our offering and grow the membership, and by extension our influence.

### **Operating Performance**

Revenues for April were slightly below target, but buoyed by interest from treasury deposits. YTD performance is good with a current surplus of £229k including treasury deposit interest payments, which is £176k above budget.

However, we must not be complacent. Revenues are down 7% year-on-year and expenditure is higher. The current reforecast predicts an operating deficit of £374k, well adrift of the budget target. Cost control and developing our business and membership will be critical to turning this around.

PhP has performed well YTD although increased costs are currently leading to a forecast deficit of ~6% in surplus for the year. Education and membership faces a similar issue but is also currently adrift of budgeted income. These may well even out over the course of the year and I trust that Paul and Rick will be aiming to ensure that we end up in surplus if at all possible.

For the record, I do not advise chasing this surplus at any cost. There will always be good years and bad years, but we should be ensuring that the money is well spent and/or invested in a way that benefits our members and by extension the profession and our patients. Some of the increased costs can be attributed to these investments/projects, as detailed below.

### **Projects**

Current project work continues, primarily within PhP. The Janus project has presented some additional unbudgeted costs although these were approved in FIC and Assembly. Updates will continue to follow in FIC and Assembly meetings.

### **Investments**

World markets continue to be volatile, although our approach to moving our investments to diversify our portfolio have likely smoothened the impact to our finances.



Our money in the Ruffer fund has largely stabilised, although FIC will be reviewing whether this remains a suitable fund going forwards due to changes in what they offer. The CCLA fund is 100% equities and therefore subject to much more volatility. While it lost £68k in April, it has provided gains in other months.

Year to date we have moved into the black with a net gain of approximately £140k across the two funds.

#### **Governance**

It is my opinion that FIC is doing a good job holding to account on financial governance, strengthened immeasurably by the addition of two independent experts. Their knowledge and experience have directly contributed to several successes since their appointment, most notably the work around our pension funds which has boosted our financial performance substantially.

#### **RPS Dashboard**

I continue to encourage all members of Assembly, but particularly those who sit on FIC, to use the RPS Dashboard, which provides an updated monthly summary of key financial indicators in a more visual format. I know I speak for members of the whole Operations team when I say that they or I would be happy to offer support with it for new or existing members.

#### **Summary**

This year is unlikely to provide us with the surpluses we have become accustomed to recently, but this is not cause for despair. Our overall finances are healthy and we have an opportunity to use the accumulated funds to transform our membership offering and publishing arm so that we continue to secure the business from future shocks.

**Alisdair Jones**

**March 2024**



## Meeting report for RPS Science and Research Committee

**Monday 15<sup>th</sup> April 11.00am – 1.00pm**

Held via MS Teams

[Click here to join the meeting](#)

### Present

Amira Guirguis (Chair), Andy Fox (AF), Barrie Kellam (BK), Cathrine McKenzie (CM), Christine Bond (CB), Delyth James (DJ), Gill Hawksworth (GH), Jayne Lawrence (JL), Ka-Wai Wan KWW), Oisín Kavanagh (OK), Olaolu Oloyede (OO), Rachel Palmer (RP), Simon White (SW)

Sunayana Shah (IPAG Chair)

Anna Pielach (AP), Claire Anderson(CA), Hanna Jenvey (HJ), James Davies (JD), Lauren Ross (LR), Liz North (LN), Parastou Donyai (PD), Paul Bennett PB), Rebecca Braybrooks (RB)

### Apologies

Andrew Teasdale, Hend Abdelhakim, Mar Estupian Fdez. de Mesa,

Mark Gilchrist (AmEAG Chair)

## 1: Recognition

Title	Item 1. Introductions, apologies, declarations of interest and Developments (Chair)	Time of item: 11:00
Description	Introduction to the meeting and matters arising/developments since the last meeting	
Purpose	To review significant developments since the last meeting Welcome to all members Apologies Agree minutes/ notes from the previous meeting Members stepping down	
Outcomes	The Chair welcomed SRC members and invited guests and outlined the setup and arrangements for the meeting. Meeting report from the previous meeting was agreed as a correct record with a note on the following: <ul style="list-style-type: none"><li>- To add attendance/ apologies and amend title of outcomes doc (previous notes)</li><li>- Slides to be shared with SRC group showing membership</li><li>- Review TOR and voting rights clause to be discussed</li><li>- To share TOR with agenda</li></ul> Group was reminded to please complete Declarations of Interest (DOI) and to alert of any changes.	



## 2: Relevance

Title	Item 2. Science & Research Update, SRT (Parastou)	Time of item: 11:15
Description	An update from the Chief Scientist	
Purpose	To relay an update on the <ul style="list-style-type: none"> <li>• 2024 RPS Science and Research Summit</li> <li>• 2024 Annual RPS Conference (AP)</li> <li>• Abstract review (SW)</li> <li>• OPERA award updates</li> <li>• JPAG/RPS joint event</li> </ul>	
Outcomes	<p>JPAG / RPS potential event in discussion. Stability focus for an event – this is a standing item for JPAG so RPS could join. Another topic to be discussed could be substance misuse.</p> <p>RPS Annual Conference in November – potential ideas have been discussed in each of the working groups.</p> <p>Possibility of a Science and Research Summit.</p> <p>HJ – brief internal conversations have been on the model that was used 2 years ago, holding a celebration event a day before conference and this will host the Awards for OPERA and Harrison.</p> <p>Annual conference theme this year is Working across boundaries – working towards excellence. Will have some time during the conference to run a science stream.</p> <p>Discussion:</p> <ul style="list-style-type: none"> <li>- Abstracts for Annual conference and selecting some for oral presentations</li> <li>- agree with plans from previous years (oral presentations from delegates rather than invited guests to link in with work)</li> <li>- showcasing those researchers at conference</li> <li>- keen to show the research going in within pharmacy</li> </ul> <p>HJ will share the programme draft as soon as possible and request for further input. Logistics need to be planned and how the committee will feed in. Want to make sure both events showcase RPS science and research.</p> <p>IJPP publication of abstracts occurred after conference last year due to timings.</p> <p>Update on abstract process from last year from SW. Numerous logistical requirements need to be put in place including reviewers. Research across profession working group are happy to deputise and learn on abstract process from SW and take forward following SW departure end of 2024.</p> <p>Thanks to SW for leading on the abstract process over the years.</p>	

Title	Item 3. SRC Update from Working Groups & Projects (Chair)	Time of item: 11:45
Description	SRC to hear from working group chairs and ratify decisions	
Purpose	To hear an update from all 3 working groups – General (Amira Guirguis / Parastou Donyai 5 min) <ul style="list-style-type: none"> <li>• New Medicines and Emerging Technologies WG (Rachel Palmer 15 min)</li> </ul>	



	<ul style="list-style-type: none"> <li>• Research across the Profession WG (Cathy McKenzie and Christine Bond 15 min)</li> <li>• Safer Medicines and Safer Medicines Usage WG (Andy Fox 15 mins)</li> </ul>
Outcomes	<p>Updates were heard from the Chairs of each of the working groups from the first meetings held. These included the first topics to be focussed on going forwards.</p> <p>New Medicines and Emerging Technologies WG – Chairs are RP and KWW</p> <ul style="list-style-type: none"> <li>- Programme of work around education of the profession and public on pharmacogenomics including gene testing, point of care testing and receiving new therapies including mRNA based vaccines/cancer treatments and the hesitancy around these.</li> </ul> <p>Collaboration and coordination with EAGs – IPAG / AmEAG to feed into the working groups.</p> <p>Limited resource across all areas so need to plan and work together on coordination with full support across areas in RPS.</p> <p>Research Across the Profession – Chairs are CB and CM</p> <ul style="list-style-type: none"> <li>- Programme of work will support RPS strategic agenda. Embedding of research into practise and promoting awareness/ creating communities of practise.</li> <li>- Support consultant pathway – education links (A&amp;C).</li> <li>- Definition of research active pharmacy professionals – those that are involved or actively leading on any aspect of the research process, this could be dispensing of a clinical trial/ basic pharmaceutical scientist to chief investigator leading clinical trials (clinical academic funded contracts).</li> <li>- Webpage updates launching this week:  <a href="https://www.rpharms.com/resources/pharmacy-guides/research-and-evaluation-guide/research-funding">https://www.rpharms.com/resources/pharmacy-guides/research-and-evaluation-guide/research-funding</a></li> <li>- The possibility of relaunching Research Ready following review.</li> <li>- Research ethics</li> <li>- Identifying key researchers (case studies), papers written, key methodologies to be shared (SRT focussed project) – PD</li> </ul> <p>GH – acknowledge the hard work from the science and research team and co-chairs of this group and thank you to everyone.</p> <p>Safer Medicines and Safer Medicines Usage – Chair is AF</p> <ul style="list-style-type: none"> <li>- need to recruit more members please consider this group</li> <li>- links/ collaboration with RPS patient safety work and country boards.</li> <li>- Also, the Joint College medicines safety group – currently working on a human factors piece.</li> <li>- Vaping and e-cigarettes – wait and see what happens with this work, can provide expertise to help RPS Policy</li> <li>- Medicines via online services – licensed and illegal sources, pull together a document on the illegal source dangers and if it could inform policy work</li> <li>- Subject matter is diverse and could also cover weight loss drugs, independent prescribing, prescribing errors, specific medicines etc.</li> <li>- Approached by HSIB to collaborate on reports on electronic prescribing and administration.</li> </ul> <p>Discussion around the following points was heard:</p> <p>LN – good to take any of the policy ideas offline and discuss, can bring items back to the group when needed.</p>



	<p>PB – CASS review gender dysphoria, could be something to look at.</p> <p>SS - public reassurance of supply chain and verifications of this - if there's no evidence? Is RPS the conduit?</p> <p>PD - SRT or SRC would have expertise to contribute towards any policy development.</p> <p>Chair - overlap with information from working groups / collaboration between groups. Educating the public, credible source of information being RPS.</p> <p>Thank you to all the working group Chairs and members.</p>
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Title	Item 4. Interface with Policy/ Guidance (Amira/ Policy Leads/ WG Chairs)	Time of item: 12:35
Description	SRC to discuss emerging matters of interest	
Purpose	<ul style="list-style-type: none"> <li>Naloxone - <a href="#">consultation</a> closed on 6 March 2024 – Policy leads/ Amira/ Parastou input</li> </ul>	
Outcomes	<p>Chair – thank you to the members who helped pulled together the RPS response, this was a good output for the group.</p> <p>Bring discussions back to the group for future meetings.</p> <p>JD – introduced the key policy work around medicines shortages that has begun. First meeting of the external advisory group has been held (set up TOR), member engagement events are happening. Further information can be found: <a href="https://www.rpharms.com/medicinesshortages">https://www.rpharms.com/medicinesshortages</a></p> <p>Want clear policy recommendations and clear ideas to go to Government on how we can tackle shortages and address the challenges so we will be pulling together a report which everyone will be able to feed into.</p>	

### 3: Any Other Business

Title	AOB, Chair	Time of item: 12:45
Description	Any other business beyond the agenda for wider discussion	
Purpose	An opportunity for SRC members to raise items for discussion not included in the agenda	
Outcomes	Nothing was noted under AOB.	



## RPS Education & Standards Committee meeting report

Wednesday 22<sup>nd</sup> May 2024, 2pm – 4pm

Venue: Zoom

Attended	Apologies
<u>ESC Board members:</u>	Paul Bennett (PB)
Lynne Smith (LS)	Charlotte Richardson (CR)
Matthew Shaw (MS)	Philip Newland-Jones (PNJ)
Heather Smith (HS)	
Gemma Quinn (GQ)	
Raminder Sihota (RS)	
Susan Roberts (SR)	
Fiona Hughes (FH)	
Amareen Kamboh (AK)	
Ailsa MacDonald (AM)	
Sally Lau (SL)	
Deborah Wright (DW)	
Lindsay Morgan (LM)	
<u>RPS Staff members:</u>	
Joseph Oakley (JO)	
Patsy Edwards (PE)	
Carys Nelson (CN)	
Anna Davies-Muir (ADM)	
Helen Chang (HC) – for part of the meeting	
Fiona McIntyre (FM) – for part of the meeting	
Alywn Fortune (AF) – for part of the meeting	



## 1. Introduction and welcome. Review of previous notes.

AC welcomed everybody to the meeting and introductions were given.

New members to the committee were welcomed and AC extended thanks on behalf of the RPS to those whose term was ending.

MS raised that from the notes of the previous meeting it was discussed that a paper regarding APCL reviews from APAP would be brought to this meeting but was absent from the meeting agenda. JO added that, as he had been away for several weeks due to compassionate leave, it was not possible for this paper to be made ready for this meeting and that it would be brought to the ESC meeting in October 2024. ADM, the newly-appointed Head of Assessment & Credentialing, was also welcomed.

No other matters arising were noted from the last meeting that would not be covered by items on the agenda. Notes were approved as accurate.

## 2. Actions tracker

CN shared updates on the actions from the previous meeting. These included establishing the governance and operational infrastructure for delivery of post-registration foundation assessments and the build of the FPCC panels.

JO updated that some historical actions had been delayed due to staff capacity. However, following approval of a business case to increase staffing resources, with the appointment of ADM as Head of Assessment & Credentialing and a Curriculum Development Manager post out to advert, we hope to progress with these soon.

ESC member comments:

- What is the committee doing to ensure that there is a shared memory of each of these actions, such as brief overview? Especially as we have new members joining the committee.

*JO added that this is part of why the decision was taken for both ESC and APAP to have a phased renewal. JO welcomed any suggestions from committee members to ensure institutional memory in ESC.*

## 3. RPS credentialing activity

ADM explained the purpose and structure of this standing item for the benefit of new committee members.

This is the first time that post-registration foundation submissions have been reported on. As the outcomes in the report derive from a modular programme, candidates were exempt from domain 1 & domain 2 along with some of the learning outcomes for the remaining 3 domains as per the RPS post-registration Foundation curriculum..

At both Core Advanced and Consultant levels, domain 5 (research) is the domain with the lowest pass rate.

It was added that there has been an ongoing issue with assessors dropping out of panels at the last minute for various reasons which has increased the administrative burden on the team.

### ESC member comments:

- Domain 5 (research) has a higher pass rate than previously which is positive.
- Is there a common pattern or theme as to why assessors have been dropping out of the panels? Is it something to do with the process or is it for personal circumstances?



*CN comments that there is a variety of reasons which have been given including workload and other personal reasons. There has been no assessor who has come forward to say that they would like to withdraw from assessing due to RPS processes.*

- It would be good to find an underpinning reason for assessor disengagement, but it sounds like people are over committing themselves and then not finding the time to be able to do the reviews.
- Do the RPS require assessors to confirm to us in advance that they have gone through the portfolio?

*JO commented that the way that competency committees are set up means it is very much an independent review and the main part of the assessment is the collaborate live discussion that happens when the panel meets. JO invited assessor members of the committee to provide feedback about the current process and to encourage any assessors who have any feedback to contact the A&C team outside of the meeting.*

- A recommendation for the future would be to have more regular contact with assessors to seek feedback.
- It is obvious that there is still an issue regarding consultant post approvals, as there are quite a few which are still going through the process, has this caused an impact to the service? Has there been any push back around this?

*JO agrees that a more consistent and meaningful approach to assessor engagement is needed and this is something the team will be looking at once ADM is fully inducted.*

*JO confirmed that we are consistently unable to turnaround post approvals within our stated timescales. He reflected that the profession seems to want to augment post-registration workforce and system assurance through credentialing and the post approval process but the capacity and engagement to implement the infrastructure to provide such assurance is not there. An example of this was that, recently, a communication was sent out to pharmacy system leaders seeking their engagement with consultant credentialing which provoked some feedback and criticism that the RPS is unable to deliver or meet demand; this revealed a misunderstanding of what the RPS is trying to achieve through this work, where it acts as an enabler for the profession to assure the profession.*

- There seems to be a burden across the profession of experiential learning and this is inevitably having an impact on clinical supervision capacity; this can be reflected in people being over committed to different areas which could be part of the assessor withdrawal issues. This is a problem across the nations, and they all have an understanding that this is a problem.

*JO asked the committee to consider if there is anything that it can do to address this, whilst remembering the extent of its remit and scope.*

- Possibly not something for this committee to consider but its about ensuring that there are job plans and protected learning time in place for the profession to engage in educational activity. Especially with education its about a culture change of spreading the burden around and upskilling more people.

#### **4. Assessment & Credentialing updates**

PE updated that the RPS have been working collaboratively with UKCPA and CMHP since 2021 to create two pioneer advanced specialist curricula in Critical Care and Mental Health. Due to a variety of barriers, these have taken longer to put together than planned but the curriculum went out for wider consultation and underwent an equality impact assessment in early 2024 with the feedback from both in the related paper.



Following the committee's approval, the curriculum documents will be designed, the webpages and comms launch plan will be created for launch in July 2024. An update to the e-portfolio platform to add specialist modules to the core advanced interface will then be implemented.

Following the consultation release, other specialist interest groups have contacted the RPS wanting to develop their own curricula for advanced level practice. The RPS are currently recruiting a Curriculum Development Manager who will be tasked with creating a policy, process and guidance for specialist interest groups on defining advanced level practice in their areas of practice.

ESC have final sign-off of these documents and they will be shared with APAP for noting due to the timings of each of the committee meetings.

## **ESC member comments:**

- It is positive to hear that there have been other specialist interest groups coming forward and wanting to develop their own curricula.
- The amount of work that has gone into producing the curricula to this point is noted and appreciated by the committee.
- It is well described within the documentation that these will be used in conjunction with the Core Advanced curriculum, however the numbering of the specialist curriculum learning outcomes is confusing (e.g. Critical Care 1.2 aligns with Core Advanced 1.3). It needs to be simple and clear for the candidates so that they are successfully able to complete the portfolio.
- Key documents for this agenda item have been embedded which means that some committee members have been unable to make notes on the documentation. There are some typos found within the document which will be sent to the A&C team.
- The explanations in the document seemed clear.
- The consultation especially, for the Critical Care curriculum, raised some interesting comments about how these developments are viewed by some individuals from the medical workforce.

*PE added there were comments from the consultation regarding how broad the curriculum was. However, if a candidate was in a particular specialist critical care unit that they may see types of conditions that may not be seen in other specialist care units, so it is crucial to be flexible to ensure that all potential candidates are covered.*

- For other specialities going forward, if there is not a core knowledge and skills guide for the core advanced curriculum, it will be difficult for stakeholders in specialist interest groups to understand what is needed for their speciality. It would be helpful to provide additional guidance going forward. This is something which could be taken to APAP.
- Is there a clear process for sign off (regarding IP) when it comes to the collaborative working between RPS and the respective organisations.

*JO commented that there is a joint venture in place with UKCPA governed by a joint venture board. The IP of the specialist critical care curriculum is owned by the joint venture. For CMHP there is a contract in place which sets out the IP and governance of the curriculum.*

- It is recognised that the e-portfolio is flexible in the types of evidence which can be uploaded, however is there a process for future specialist interest groups who want to develop their own curriculum as to what evidence should be included?
- The RPS should be mindful about who these curriculums could potentially exclude, e.g. public health advanced pharmacists.
- It would have been appreciated if the committee could have seen earlier draft versions of the curricula, so that any comments could have been shared with the A&C team, so that there would be confidence that some of the points which have been raised will be addressed.



- The committee would be open to having more specific additional one-off meetings where needed to be able to look at particular pieces of work to support the team.

**DECISION:** The committee approved the curricula for publication subject to the requested changes

## **5. Quality assurance of pharmacy education and training**

FM, AF and HC introduced themselves to the committee and explained that they were attending the meeting to discuss the consultation and proposal which had come from the GPhC on the quality assurance of pharmacy education and training.

The current assurance process from the GPhC is described in the consultation papers along with the proposed changes which they are looking to implement. The RPS has generally received positive feedback regarding these changes but there has been a call for clarification on timelines and ensuring that the process is proportionate along with other feedback.

### **ESC member comments:**

- These changes are moving towards the medical model which is currently used by the GMC.
- In relation to the GPhC accreditation process, it is important to remember that it is more than just pharmacists, but it also covers others who work within the profession (e.g. pharmacy technicians and pharmacy support staff).
- It would be a struggle for this to work with non-HEI training providers and would present a significant extra burden on resources.
- What is the purpose and what is trying to be achieved from making these changes?
- What metrics/data would be used to inform any interim inspection decisions; clarification would be needed on how valid these data are, especially as the metrics would differ depending on the provider.
- Need to be mindful that the use of certain data and KPIs does not drive perverse behaviours which may actually negatively impact quality of education; this has been seen in school education for example.
- Unclear as to the value of NSS specifically to pharmacy as a metric especially as previous experience would say that very few actions come out of the NSS process.
- Within quality assurance there is already an oversaturation especially within NHS England with the quality framework and the roll out of the safe environment charter. Would this lead to duplication for employers in the future?
- Could end up with a mass of data collected which later becomes meaningless.
- There have been discussions within workplaces, that they would need to be gathering data for this for the upcoming year but not knowing what data they would need to collate and the impact that this would have on workloads to bring this together.



# ROYAL PHARMACEUTICAL SOCIETY

**Assembly meeting 17th July 2024**

**24/07/ASB/02i – Open**

<b>Title of item</b>	Education and Membership Update
<b>Open, confidential or restricted item</b>	Open
<b>Author of paper</b>  <b>Position in organisation</b>  <b>Telephone</b>  <b>E-mail</b>	Neal Patel Helen Chang
<b>Item to be led at the meeting by</b>	Neal Patel/Helen Chang
<b>Purpose of item (for decision or noting)</b>	Noting
<b>Headline summary of paper</b>	Membership and Education Update



## **Membership and education report**

### **Executive summary**

Recruitment continues to be strong vs previous years particularly for Foundation Trainees as well as full members.

Product usage is growing driven by a real focus on products and service engagement.

Active campaigns include a segmented approach to winning back those who lapsed their membership in the first quarter using a targeted email journey to entice these lapsed members back into membership – based on their prescribing status, primary sector, country, use of RPS products and services.

We are seeing good results from prescribing content.

Retention is a year-round activity with engagement through our digital channels, especially member email newsletters, a focus that is paying dividends. A concerted effort has gone in to encouraging members to resubscribe to emails and therefore have an increased awareness and engagement with RPS.

### **Operational Activity**

#### **Foundation Trainees**

Our hypothesis was that by including revision events and mock exams within membership we would increase engagement with Foundation Trainees, this has proved very successful. Our engagement team is now gearing up to meet new 2024/25 Foundation Trainees in their first weeks of employment, attending events across Great Britain to encourage trainees to continue their student membership as Foundation trainees.

Our attention is now on creating a compelling proposition for newly qualified pharmacists who will register with GPhC in August. Our new “Newly Qualified Pharmacist Programme” will focus on helping members with the challenges faced in the first year of post-registration practice through webinars and face-to-face events.

Newly qualified pharmacists will be invited to attend celebration evenings where members will receive certificates celebrating the start of their journey as registered pharmacists. We are trialling this at six locations across Great Britain, namely, London, Cardiff, Edinburgh, Newcastle, Bath and Nottingham.

#### **Development of membership**

Since our last Assembly meeting we have taken another big step forward in developing a seamless and joined-up membership experience through the creation of a new product management function in the Professional Leadership Body. Two new product managers have been employed to bring together expertise and accountability for the development and continual improvement of our Membership and Education product suite. Working with



our technology team they will create a single user digital experience that is critical for future membership growth.

### **Membership Product and Service Engagement Summary**

Overall product engagement has been strong and surpassed most targets for the first half of the year. This growth is primarily driven by members. Traffic surpasses same time last year. We have now been using GA4 (the new Google analytics product) since June 2023 so have now established a new baseline for users and traffic to the pages.

Overall, we see sustained growth across all our products indicating the value in promoting membership. We continue to monitor product use across all member types and are looking to segment our data further to understand how, when and why members use specific products. This helps us to improve engagement and ensure members are finding and looking at the things they need. With the move to GA4 last year, we have now established new benchmarks for users. We will focus further on segmentation and personalisation in 2024 and beyond to look at the frequency with which members come back to products and link this with our survey data.

### **Education and professional development summary**

Education and professional development activity for the first half of 2024 largely focused on developing learning content and resources to support members, including eLearning, webinars, and events. We continued to deliver support for prescribers and are collaborating with Health Education and Improvement Wales (HEIW) to provide a new learning programme for pharmacists in Wales.

#### **Students**

We delivered a series of joint webinars with NHS England (NHSE), NHSE Education Scotland (NES), Health Education and Improvement Wales (HEIW) and British Pharmaceutical Students' Association (BPSA) to support third year undergraduate students to prepare for the national foundation training recruitment scheme (Oriel) 2024/25. 624 students registered for the webinars which focused on navigating the recruitment process.

We are planning workshops for August and September that focus on the numeracy and situation judgement test assessments which form part of the recruitment scheme. There has been a good level of interest in these sessions.

Details of resources for the national recruitment scheme can be found in our website: <https://www.rpharms.com/development/students/national-pharmacist-foundation-training-recruitment/national-pre-reg-pharmacist-recruitment-help> We've recently updated this with new information from NHSE, HEIW, and NES.



## **Foundation training**

Our revision programme for Foundation trainees kicked off in March; we delivered a total of 25 live webinar dates (in five topic area, each repeated five times). As part of the programme, trainees have access to our mock registration assessment, and the opportunity to attend feedback sessions, to help them confidently prepare for their assessment in June. Engagement with the revision programme this year has exceeded previous years, which demonstrates the ongoing need for high-quality revision support.

We are already planning the Foundation trainee programme for the 2024/25 Foundation trainees, which will commence in September, and includes the delivery of a series of webinars to guide them through the training year.

We also continued to work with NHSE to develop their Foundation Trainee Pharmacist E-Portfolio and have made several changes and enhancements to the user experience. We are now preparing the portfolio for the 2024/25 Foundation trainees, including delivery of onboarding webinars in July.

## **Prescribing**

We are developing and delivering learning programme for pharmacists in Wales to deliver the Pharmacy Independent Prescribing Service (PIPS) with confidence. The programme is designed to equip pharmacists, mainly in primary care settings, with the essential knowledge, skills, and confidence needed to provide excellent patient care. Further information about the programme can be found on our website:

<https://www.rpharms.com/about-us/news/details/new-programme-to-enhance-prescribing-skills-in-wales>

We also delivered two webinars to support prescribers as part of our prescribing pathways series; this included a 'Pharmacist Prescriber Showcase'.

## **Mentoring**

We continued to see excellent engagement on the RPS mentoring platform; we have just over 2,300 registered users on the site. Our mentoring advisory group continues to support our work; we met in April 2024 and discussed how mentoring can support our equality, diversity, and inclusion workplan.

## **Career support**

We have continued to deliver webinars as part of our Careers in Pharmacy series; learner registrations and attendance has exceeded targets. We delivered our second webinar, 'Careers in Education and Academia' in January and our third webinar 'Exploring Careers in Other Pharmacy Settings' in March. Both were well received by delegates. In February we also delivered a careers fair for Foundation trainees and newly qualified pharmacists;



delegates received the opportunity to speak to pharmacist in multiple different settings about their journey.

### RPS Live (educational webinars and events)

We continue to deliver a range of Live learning content to our members, Between January and June, we have delivered five webinars. A summary of the sessions can be found in the table below.

Month	Webinar content	Number of registrations	% Learners who would recommend to a colleague
January	Careers in Education and Academia	138	96%
January	RPS and NICE webinar series: Suspected acute respiratory infection and virtual ward technologies	145	94%
February	Career opportunities in Pharmacy – careers fair	257	98%
March	RPS and NICE webinar series: Cardiovascular disease and lipid modification	269	100%
March	Exploring pharmacy careers and opportunities	188	100%

Sessions planned for later this year include a series on human factors (a collaboration with Royal Colleges), National Institute for Health and Care Excellence (NICE) clinical updates (a collaboration with NICE) and clinical learning sessions, such as management of sepsis.

### RPS' eLearning service

We are currently developing a new digital learning platform to host all our educational and learning content. RPS' eLearning service will contain interactive, bite-sized learning all in one place. Members will be able to access learning 24/7, at a time and location that best suits them. There will be a variety of blended learning presented in a range of formats – we aim to deliver accessible and inclusive content that considers individual learning styles and needs. We are planning to launch the platform later this year.



**Assembly Meeting 17th July 2024**

**23/07/ASB/02j - Open**

<b>Title</b>	Inclusion and Diversity update
<b>Open, confidential or restricted</b>	Open
<b>Author</b> (include email/phone)	Amandeep Doll <a href="mailto:amandeep.doll@rpharms.com">amandeep.doll@rpharms.com</a> 0207 572 2353
<b>Position</b>	Head of Professional Belonging and Engagement
<b>Purpose of item</b>	Inclusion and Diversity update to Assembly to ensure accountability of delivery.
<b>Item Summary</b>	This paper provides an update on Inclusion and Diversity Strategy programme delivery for Q1 & Q2 and upcoming activity for 2024
<b>Related Risk Register item (where applicable)</b>	<ul style="list-style-type: none"> <li>• RPS to continue delivering their commitment to the 5-year RPS Inclusion and Diversity strategy</li> <li>• Engagement with key stakeholders and pharmacy organisations to create change and long-term commitment to RPS Inclusion and Wellbeing pledge</li> <li>• Staff absence and sickness</li> </ul> All risks have been mitigated against
<b>Related RPS Strategy item (where applicable)</b>	All
<b>Actions/decisions required of the Assembly</b>	None



## Inclusion and Diversity Update

### Background

[RPS Improving Inclusion and Diversity across our profession: our strategy for pharmacy 2020 – 2025](#) was launched in June 2020, with a commitment to improving inclusion, diversity and creating a sense of belonging for the whole profession.

We are committed to continue to deliver against our strategy and ensure there is an improved sense of belonging across the profession. We must have a fair profession where everyone feels they belong for us to best deliver on all our professional responsibilities.

### Summary of activity to date

#### 1. Address Black students' degree awarding and registration assessment attainment gaps

RPS are chairing a working group with partners from across the profession to address the registration assessment differential attainment and Mpharm degree awarding gap experienced by Black pharmacy students and foundation trainees.

Partners in the group are BPSA, GPhC, NHS England, Pharmacy Schools Council, UKBPA, NHS IPP representatives and representatives from Schools of Pharmacy. Following the first meeting in September 2023, a report has been published which sets out the recommendations and actions that will be taken forward by the group to reduce the differential and degree awarding gaps in a meaningful and sustainable way.

The working group will meet every 6 months to review the progress made on the actions and recommendations. Smaller task and finish groups will be formed with members from within the profession to support with the delivery of the actions.

Steps are being taken to move forward with the action: Embedding and sustaining change through sharing best practice with the NHS England Workforce Education and Training Pharmacy team in planning the next EDI forum which will be held in Q3.

To promote the findings of the report, African Caribbean Pharmacy Network (ACPN) are writing a blog series accompanying the discussions at an ABCD meeting, bringing to life the impacts of the awarding and attainment gaps. Encouraging members to think about the positive changes they can make in their workplaces.

#### 2. Inclusion and Diversity Programme Review

We are conducting a review of the RPS Inclusion and Diversity programme to determine its impact on the pharmacy workforce and to evaluate how effective the programme has been in meeting its original aims and objectives.

The programme review is being undertaken in 2 workstreams:

- **Workstream 1** A literature review is also being conducted, with an aim to share initial result at the RPS conference in November. The profession wide inclusion and diversity survey was open for 3 weeks with 632 responses, the Science & Research team have conducted focus groups to explore in depth individual responses focused on the following themes:



- What does a sense of belonging mean to you?
  - Us v's Them – barriers to engaging with I&D topics
  - Cultural Competence
- **Workstream 2** through completion of the [Diversity and Inclusion Progression Framework 2.0](#) created by the Royal Academy of Engineering and the British Science Council we will assess how well I&D has been embedded internally across our products and internal governance structures to identify what we are doing well and how we can improve.

An updated Inclusion, Diversity and Equity strategy will be published in Q1 2025.

### 3. The Architecture of Pharmacies project

The RPS have been invited to be part of a Pharmacy Research UK project commissioned to look at the architecture of community pharmacies. Considering how they can be made more accessible and inviting to members of the public and patients to share their ailments and concerns.

The report is due this year, the RPS have supported an exhibition for London Architecture Week at the Bromley by Bow Centre. The museum team have supported in providing material for the exhibition as well as presentations from both the museum team and Head of Professional Belonging.

Discussions are being had about when to host a pop up exhibition at the RPS

### 4. Equality Impact Assessments

Working with the project leads EQUIAs have been undertaken for the Repeat Prescribing Toolkit and Greener Pharmacy Standards. Providing support and chairing the workshops.

### 5. Drumbeat Events and Celebrations

- **International Women's Day event**

The RPS co-hosted a successful IWD event at the RPS London office, with 50 people attending. The feedback from the event was really positive with attendees feeling inspired and wanting to return for future events.

- **Autism Awareness Month**

Shared blogs of lived experience and PJ CPD article for the month

- **Transgender day of visibility**

Shared a blog about inclusive care for trans patients

- **Celebrating religious festivals** – Easter, Eid and Vaishaki

- **Deaf Awareness Week**

Sharing a previous live session, about living and working with a hidden disability

- **Pride**

The RPS team, members and board members have walked in Cardiff Pride

### 6. Upcoming activity

In addition to the work continuing into Q2 and Q3 highlighted above, the following activities are also being undertaken.

**Planning for future drumbeat events – working with** GHP, Female Pharmacy Leaders Network, Pharmacy Technicians of Colour, UKBPA, BPSA and APTUK to host profession wide events including, South Asian Heritage Month and Black History Month.



**ASSEMBLY MEETINGS 2025**

Assembly Working Day	25 <sup>th</sup> March
Assembly Meeting	26 <sup>th</sup> March
Assembly Induction Day	15 <sup>th</sup> July
Assembly Meeting	16 <sup>th</sup> July
Assembly Working Day	18 <sup>th</sup> November
Assembly Meeting	19 <sup>th</sup> November



**List of Fellows Appointed in May 2024**

Jeff Aston  
Sarah Cavanagh  
Richard Daniszewski  
Alastair Florence  
Benjamin Kelly Hannan  
Sundus Jawad  
Susan Catherine Jones  
Rupvinder Kahlon  
Emily Kennedy  
Stephen Morris  
Erutase Oputu  
Helen Porter  
Hatul Shah  
Sobha Sharma Kandel  
Mathew Smith  
Nicola Stoner  
Judith Vincent  
Joseph Williams  
Laura Wilson

The Panel also accepted the following posthumous fellowship:

Moody Meng



<b>Title</b>	<b>RPS International Strategy 2024/2025</b>
<b>Open, confidential or restricted</b>	Open
<b>Author</b> (include email/phone)  <b>Position</b>  <b>Director responsible</b>	Laura Wilson <a href="mailto:Laura.wilson@rpharms.com">Laura.wilson@rpharms.com</a>  Director for Scotland  Paul Bennett, RPS CEO
<b>Purpose of item</b> (for noting/discussion/ decision/approval)	For discussion and approval
<b>Item Summary</b>	This paper sets out the RPS International Strategy for the coming years. The aims are to: <ul style="list-style-type: none"> <li>• refocus our international intentions going forward</li> <li>• make the most of membership of international organisations</li> <li>• realise the benefits for members and staff of our connections and investment</li> </ul>
Related Risk Register item (where applicable)	Risks as outlined in the paper
Related RPS Strategy item (where applicable)	<ul style="list-style-type: none"> <li>• Shape the future of pharmacy and medicines use</li> <li>• Working in collaboration and partnership</li> <li>• Enhance our organisational effectiveness</li> </ul>
<b>Actions/decisions required of the Assembly</b>	Approval for the proposed international engagement as described.



# **RPS International Strategy 2024-2025**

## **Executive summary**

RPS was a founding member of FIP and as such has been making a significant contribution to pharmacy practice on an international stage for many years. The nature of this contribution has varied over the years and the pandemic shifted our focus to more domestic issues. This strategy will aim to refocus our international intentions going forward, make the most of membership of international organisations and realise the benefits for members and staff of our connections and investment.

## **Introduction**

Pharmacy in the UK has progressed significantly over the last twenty years and is now considered to be ahead of many other countries with regards to clinical and workforce advancement. We have seen from our international engagement up until now that other countries wish to learn from us and that we have a significant role in helping other countries develop.

We can also learn from others who have progressed in different areas or in different ways. Member importance in our international presence was highlighted by the strength of feeling displayed following our departure from FIP in 2022. Revisiting this decision, we rejoined in January 2023 and had a presence at the FIP 2023 Congress in Brisbane, Australia. We now want to build on this by not only considering what we can offer to the international pharmacy community, but what we need from them and how they can help us.

We also have a longstanding relationship with Commonwealth Pharmacists Association (CPA) and continue to provide support.

We also have more informal relationships with other international organisations, usually held on an individual basis rather than a recognised organisational relationship.

## **Current position**

As of 1<sup>st</sup> Jan 2023, we have rejoined FIP and attended the Congress in Brisbane where we were represented by our President, Claire Anderson, and Tracey Thornley, our nominated representative on the FIP Community Pharmacy Section Executive Committee.

We were not able to contribute fully as we had not submitted any abstracts for consideration for this congress.

Last year, we presented our sustainability work at the International Forum on Quality and Safety in Healthcare (IH) in Copenhagen where there was huge interest in our approach to embedding sustainability in pharmacy.

In October, we took a stand at European Society of Clinical Pharmacy (ESCP) conference in Aberdeen and delivered a workshop on prescribing. There was significant international interest at that event in what pharmacists do in the UK and how we have got to where we are with the profession.

We are also members of the European Association of Hospital Pharmacists (EAHP) and the European Industrial Pharmacists Group (EIPG).

While we have had some international presence in the last year or so, other than FIP, these have been very opportunistic and ad hoc contributions which rely on the submission and acceptance of our abstracts or invitations to attend.

Having made the decision to rejoin FIP, this strategy will allow us to improve our standing on the international stage, contribute to the improvement of pharmacy practice globally and remain informed of and relevant to the development of the pharmacy profession across the world.

The objectives and performance indicators within the strategy are indicative of the commitment we have already made to our international presence by rejoining FIP while looking to expand on that.



## **Aims and ambition**

The aims and ambition of this work is directly related to the organisational mission and vision:

Our mission is to put pharmacy at the forefront of healthcare.

Our vision is to become the world leader in the safe and effective use of medicines.

To make our vision a reality, we need to ensure a presence and a voice on the international stage.

In developing this work, we will bring value to the RPS in several ways:

- Value to RPS reputationally and from a humanitarian perspective
- Value to individual members
- RPS will lead on improving pharmacy practice in Great Britain using learning from our international engagement

## **Strategic goals**

### **Connections & Collaboration**

- Form new international connections and forge strong relationships between RPS and international organisations to support pharmacy in other countries
- Facilitate knowledge exchange and sharing of best practice from an international perspective between PLB and PhP
- Explore areas for collaboration with international member organisations and pharmacy organisations in other countries to support and influence healthcare design global
- Build on connections we already have with FIP and CPA and grow our collaboration with them
- Support RPS representatives sitting on international committees on our behalf
- Develop networks which may create opportunities for the building of commercial relationships

### **Learning & Development**

- Support others to provide high-quality educational content to help them advance the pharmacy profession in their country
- Learn from countries where practice is more advanced in some respects or that has advanced in different ways and work to use this learning to improve practice in Great Britain
- Understand the differing roles of pharmacists in other countries, learn about the shared challenges faced by the profession e.g. workforce, learning and development, etc. and work to support them using our experiences
- Give global opportunities for our members to highlight their work, growing the leadership opportunities within the RPS
- Explore opportunities for RPS and members to take part in research and quality improvement on an international level

### **Promote the safe and effective use of medicines on an international stage**

- Promote our patient safety work
- Share how we have created credentialling and frameworks to assure practice and progress the profession
- Promote the role of pharmacists and their expertise, and advocate for the advancement of pharmacy practice at an international level



### **Internal awareness**

- Improve awareness within RPS of what international organisations can do for us and what support and resources are at our disposal e.g. FIP can offer support with data, insight boards, focus groups, case studies and networking, we need to make staff aware and use these resources
- Raise awareness of FIP, CPA, EAHP, EIPG and other international organisations among RPS members. Communicate the benefits of membership and highlight the work we are doing
- Get more members and RPS staff involved in working on an international stage and contributing to this programme

### **Inclusion and diversity**

- Share our work on I&D, including on topics such as differential attainment and help pharmacy become an inclusive profession for all at an international level
- Support global initiatives to address healthcare disparities, improve access to pharmacy services and promote health equity

### **Specific objectives – 12–18 month timeline**

- Presence at international pharmacy conferences specifically FIP
- Collaborative engagement with international organisations to provide webinars and content
- Participate in international awards to raise the profile of the work of RPS and our members
- Closer working with CPA and FIP on joint priorities and current themes
- Maintain RPS representation on international committees
- Greater engagement and input into other international pharmacy and healthcare organisations and events e.g. ESCP and IHI
- Raise awareness of FIP with RPS members, highlighting benefits and resources available to them
- Map current RPS involvement with international organisations and look at opportunities across the organisation

### **Risks**

Risk	Mitigation
No budget for this work for 2024, anything we decide to do will need to be covered with an approved business case or funded via existing budgets	
Lack of budget means that it is difficult to plan to a certain extent and opportunities may be missed for attendance at or hosting of events and decisions may be delayed regarding submissions and agreements to work collaboratively	
No perceived benefit to RPS or individual members	One of the strategic goals is to raise member and staff awareness and involve people more where appropriate



Competing priorities of teams within RPS to deliver the international support required	Regularly review workplans across all teams to ensure agreement of international input. Review time commitment regularly and ensure this is planned appropriately with any work agreed to.
We have no suite of Intellectual Property products to offer internationally	Consider development of a range of RPS IP products which would be scalable and sellable with appropriate support, pricing, and legal frameworks in place

### **Performance indicators**

- Significant presence at FIP Congress achieved
- Continued RPS representation at FIP
- Agreed joint working with CPA going forward
- Delivery of educational/learning joint events with Pharmaceutical Society Australia and Malaysian Pharmaceutical Society
- Presentation and engagement at International Forum on Quality and Safety in Healthcare, London 2024
- Member section on international work and relationships on RPS website with information on what FIP, CPA and other organisations are doing and what they can do for them
- Better organisational understanding of our international work
- Mapping of our work over 12 months to evaluate levels of engagement and organisational benefit

### **Emerging opportunities**

- Hosting FIP CPS ExCo midyear meeting (agreed)
- Abstract submission at FIP covering prescribing, Hospital review work, Deprescribing review (two oral presentations and three posters accepted)
- Attendance at Brazilian Congress of Pharmacy, Nov 6-8
- Member of PSA Prescriber education EAG
- Involvement in EAHP conference 2025
- Engagement going forward with EIPG

### **Proposed costs of in person international engagement**

Costs will be dependent on decision to attend an event, the location of events and the number of people attending. The most appropriate person/people for each event will be identified and supported to attend.

### **Proposed costs of remote engagement and other proposals**

It is anticipated that these costs would be minimal and would be measured in staff time rather than financial outlay.

Where there was a potential cost to be incurred the organisational benefit would need to be evaluated and the budget agreed.

### **Support for our FIP CPS Ex-Co representative**



This support will be to facilitate the representative being an active part of the group and attendance at meetings, as necessary. Costs incurred will include staff time to support development of any required resources and travel costs. It is difficult to estimate these due to the varying locations where meetings are held.



<b>Title</b>	<b>RPS Nominee to FIP Community Pharmacy Section Executive Committee (CPS ExCo)</b>
<b>Open, confidential or restricted</b>	Open
<b>Author</b> (include email/phone)  <b>Position</b>  <b>Director responsible</b>	Paul Bennett <a href="mailto:Paul.bennett@rpharms.com">Paul.bennett@rpharms.com</a>  CEO  CEO
<b>Purpose of item</b> (for noting/discussion/ decision/approval)	For discussion & decision
<b>Item Summary</b>	To agree the approach to support an RPS candidate in the forthcoming FIP CPS ExCo elections
Related Risk Register item (where applicable)	Various risks associated with reputation, transparency, governance, and partner organisations.
Related RPS Strategy item (where applicable)	<ul style="list-style-type: none"> <li>Working in collaboration &amp; partnership</li> <li>Enhancing organisational effectiveness</li> </ul>
<b>Actions/decisions required of the Committee</b>	Assembly is asked a) whether to again respond positively to the invitation by FIP CPS to nominate a candidate to participate in forthcoming ExCo elections b) If so, to agree whether the existing nominee (a past EPB member whose ExCo term is ending) is supported to stand again for election or c) Whether Assembly wishes to extend the opportunity for existing Assembly or Board Members to stand now or in the future



### **Background and Recent Nominations to FIP CPS EXcO**

RPS has previously nominated members who have been successfully elected to the FIP Community Pharmacy Section (CPS) Executive Committee (ExCo) and at the time they have typically been serving members on one of the three National Pharmacy Boards.

In September 2020 Professor Tracey Thornley (then an EPB member) was successfully elected to the CPS ExCo for a term which concludes this year. The usual term of office of a successfully elected member is four years, and at a meeting to be held on 22 August 2024 the Steering Committee of CPS will elect three Executive Committee members.

The duties of the ExCo member included with the request for nominations as follows. Further background regarding the FIP CPS can be found in Appendix One.

The Executive Committee usually meets three times annually - twice in connection with the annual FIP Congress (prior to and following the Congress) and at a two-day Midyear meeting in February/March. It is expected that the members of the Executive Committee take active part in the professional activities of the Community Pharmacy Section, in the planning and implementation of the sessions of the annual Congress, and in other educational activities as well as contributing to working groups set up by the Section. Reasonable expenses incurred in attending meetings will be covered by the Society in accordance with the current Expenses Policy.

**Please note you must already be a member of the Community Pharmacy section of the FIP to be eligible for nomination.**

Prof. Thornley continued in her position, after a short hiatus imposed by FIP when RPS withdrew membership from FIP in 2022, after her term on EPB came to its natural end in June 2022, and after Assembly agreed in July 2023 that she should see out her full term of office despite, at that time, no longer being a member of RPS governance. It is worth emphasising that **there is no requirement for the nominee to be a member of the nominating organisation or its governance structure**, but they must be a member of the community pharmacy sector of FIP to be eligible.

RPS Assembly recognised the excellent work that Professor Thornley had undertaken on behalf of the profession and the respect that she had earned amongst FIP and RPS colleagues in doing so, and was unanimously supportive of endorsing her continuation in position.

As that term of office now draws to a close, the RPS should consider whether it again wishes to nominate a candidate for the forthcoming CPS ExCo elections, and if so whether it wishes to continue to endorse Professor Thornley as its nominee or whether to open the opportunity to others for consideration.

Professor Thornley has indicated that she would be prepared to complete another term in office if supported by RPS to do so, and if successfully re-elected by the CPS Steering Committee.



**Matter for Consideration & Next Steps**

All Member Organisations (such as RPS) have been invited to nominate a candidate on behalf of their organisation. See Appendix 2 (Letter of Invitation). The Statutes of the CPS require that each member of the ExCo must be from a different country.

The last time this opportunity was presented to Assembly and Board Members there were three submissions received for consideration (all from EPB members) and a unanimous decision was reached by COG to put forward Professor Thornley.

During her time on CPS ExCO, Tracey Thornley has recently become the Chair-elect of the Data and Intelligence Commission of FIP which is an influential position and relevant to our own work on professional data capture, workforce intelligence etc.

RPS has also agreed to host the FIP midyear CPS ExCo meeting (scheduled for March 2025) at East Smithfield. This will see 1.5 to 2 days of ExCo meetings at RPS followed by visits to community pharmacies organised by RPS staff and a roundtable event with key pharmacy leaders on topics of international interest. This will further strengthen our intent regarding building international relationships.

**Recommendation**

Taking all considerations into account it is recommended that Assembly.

- a) continue to support a nomination to CPS ExCO
- b) Endorse Prof. Thornley as the RPS nominee for a second and final four-year term
- c) At the conclusion of the next full term open the invitation initially to Assembly and Board Members and others known to have the appropriate skills to effectively fulfil the requirements of the role

Author: Paul Bennett  
July 2024



## Appendix One

The International Pharmaceutical Federation (FIP) is the global body representing pharmacy, pharmaceutical sciences, and pharmacy education with over 152 organisations in membership. RPS is a founding member (since 1912) and after a one-year absence in 2022 has re-joined.

FIP has a number of 'Sections' that reflect the various areas of pharmacy such as Hospital, Industrial, Military & Emergency, Health & Medicines Information etc. The Community Pharmacy Section (CPS) of FIP has several objectives according to the FIP website;

- To improve the professional standards of pharmacy and encourage realisation of the social aims of the profession as a part of public health and as a pharmaceutical service to the community;
- To plan and be responsible for the activities of the International Pharmaceutical Federation in the field of community pharmacy; in particular:
  - To provide and exchange information that assists in the coordination and improvement of the **scientific, technical and professional activities** of community pharmacists;
  - To organise meetings for members of the section during FIP congresses such as the World Congress of Pharmacy and Pharmaceutical Sciences, in accordance with approved general congress programmes;
  - To study and report on any matter of interest to community pharmacists.

CPS has an Executive Committee (ExCo) elected from amongst Sector members. The President serves for four years and cannot be re-elected but remains in office as Immediate Past President for two years. All other officers are elected for four years and may be re-elected for one further four-year term.

[The Statutes of CPS can be found here ( <https://www.fip.org/files/content/pharmacy-practice/community-pharmacy/fip-cps-statutes-valid-from-2013-final.pdf> )]

**Section 5.1** of the Statutes state 'The Executive Committee shall consist of the President, the Secretary and seven (7) additional members. The members of the Executive Committee shall be pharmacists and members of the Community Pharmacy Section and nominated by their national Member Organisations.'

**Section 5.6** states 'The Secretary and the other seven (7) members of the Executive Committee shall be elected by the Steering Committee for 4 years terms.'

It should be noted that there is no requirement or expectation that the Member Organisations (MO) nominee be an Officer or governance member of the MO and nomination does not guarantee appointment to the CPS ExCo, this is a matter decided by the Sector.



## Appendix Two

To the CPS Member Organisations representatives

### Elections for the Executive Committee (ExCo) of the Community Pharmacy Section.

We are pleased to inform you that there will be three vacancies for the CPS Executive Committee: **two vacancies as Ordinary members of the Executive Committee**, and **one vacancy as Professional Secretary/Treasurer** to be filled at the **meeting of the Steering Committee Thursday 22 August 2024, 12pm-2:30pm CEST** since Prof. Tracey Thornley (UK), and Ms Ana Zovko (Bosnia and Herzegovina) will have completed their terms of office, and Mr Jaime Acosta-Gómez (Spain) is stepping down for personal reasons.

According to the Statutes, the members of the Executive Committee shall be from different countries. You can see the nationalities of the current ExCo members at: <https://www.fip.org/community-pharmacy>

Members of the Executive Committee shall be elected by the Steering Committee for a 4-year term and may be re-elected for one additional 4-year term.

We hereby invite you to nominate a candidate on behalf of your Association.

If you wish to accept the invitation, we kindly ask you to submit your nomination to the Secretariat (email: [j.acostapharm@gmail.com](mailto:j.acostapharm@gmail.com)) **no later than 31 July 2024**.

The nomination must provide detailed information in English on the candidate, including:

1. a short **biography** (max. one A4 page)
2. a **statement** (max. two A4 pages) from the candidate with a short outline of the expected contribution the candidate will bring to the Community Pharmacy Section.
3. a **letter of support** from the nominating FIP-CPS Member Organization.

Candidates will have the opportunity to give a **3-minute presentation** to the Steering Committee as part of the election process. Candidates can send in advance a **recording** of their 3 min presentation (**deadline 14 of August 2024**; email: [j.acostapharm@gmail.com](mailto:j.acostapharm@gmail.com)), or present **live online** during the Steering Committee meeting (**Thursday 22 August 2024, 12pm-2:30pm CEST**)

Please find attached a Q&A, which you might find useful in understanding the roles and responsibilities of Community Pharmacy Section ExCo members.

Please note that candidates must be **individual members of FIP and of the Community Pharmacy Section** at the time of nomination, and that it is expected that expenses incurred by elected representatives be met by the national pharmaceutical organisations/FIP Member organization submitting the nomination, or by private arrangements made by the representative. The Section will not be responsible for financial reimbursement.

The Executive Committee usually meets three times annually - twice in connection with the annual FIP Congress (prior to and following the Congress) and at a two-day Midyear meeting in February/March.

It is expected that the members of the Executive Committee take an active part in the professional activities of the Community Pharmacy Section, in the planning and



implementation of the sessions of the annual Congress, and in other educational activities as well as contributing to working groups set up by the Section.

You will later be notified of the list of candidates nominated to contest the election and of the rules governing this procedure.

Yours sincerely,

Jaime Acosta-Gómez  
Professional Secretary