

PRESS RELEASE
PHARMACY OFFERS MUCH MORE IN PUBLIC HEALTH

The Institute of Pharmacy Management responded recently to the Consultation Process on the White Paper on Public Health and additional documents. Key points were: -

- The Institute suggests that there needs to be developed a comprehensive strategy for pharmacy and public health in the new NHS.
- Reorganisation must not destroy what already exists, whilst many current pharmacy PH roles and new opportunities are missed by the proposals.
- It is pleased to see pharmacy mentioned in the White Paper, but feels the level of input made beyond the Portsmouth scheme by pharmacists to public health in all sectors of the NHS and at strategic level is seriously underestimated and largely ignored in all the consultation papers.
- There is a serious risk that specialist pharmacists working in public health in England will be lost in restructuring and the public and Government will be significant losers in terms of reduction in current services and loss of what is a great opportunity for pharmacies to form the hub of community public health services of the future.
- Government should recognise that pharmacies form the heart of many communities especially as post offices disappear and that the public health takes precedence over commerce in this area
- A comparison with Scotland would show how much pharmacists can and have contributed in all areas and levels of public health over the past 10 years and beyond.
- The Institute also believes that medicines management and safe and effective use of medicines is a public health function that is not seen as such, perhaps because the definition of public health dates from 1923 before effective medicines were available. Drug alerts, unused medicine disposal, emergency medicine supply systems are omitted.
- For a Pharmacy Framework to work effectively will require pharmacist involvement at senior policy making level in Public Health England, at Strategic level, in Health & Wellness Boards and in local authority public health departments with a support infrastructure within the NHS or local authority paralleling the arrangements in Scotland. There should be a requirement to develop a pharmacy and medicine focussed strategy with LPC's.
- It is important to involve pharmacists in the managed service, hospital and prison pharmacists and community services pharmacy (which serve clinics, schools, prisons etc) also contribute to public health initiatives and need to be involved.
- Recent policy papers on pharmacy public health such as DoH *Choosing Health through Pharmacy* 2005 seem not to have been considered.
- We would expect pharmacy staff working with DPHs to transfer to Local Authorities under TUPE and for NHS budgets for these posts to also transfer.
- Local Pharmaceutical Committees should have rights of access to local authority organisations and contribute to public health developments locally

Background

The Institute was founded in 1964 as an educational non-profit making body and has over 300 members worldwide in all branches of pharmacy. Membership is open to pharmacists, associate membership to non-pharmacists and reduced rates are available for those who have retired. Corporate membership is also available to companies.

Further information from:

*Howard McNulty, General Secretary, The Institute of Pharmacy Management, 14 Coronation Way, Bearsden
Glasgow G61 1DA*

E-mail: howard.mcnulty@ntlworld.com

Tel/Fax 0141 570 1320