



Claire Anderson

The PDA has offered candidates of the Royal Pharmaceutical Society (RPS) National Board Elections 2024 in England and Wales the opportunity to tell PDA members their views on key issues. Below is Claire Anderson's response:

1. What would you hope to achieve over the course of your office, if elected?

I am running for the English Pharmacy Board election with a view to completing my term as president to help lead the implementation of the constitution and governance review over the rest of this year and to be part of the work of the UK Pharmacy Professional Leadership Advisory

Board who have just met for the first time.

The RPS boards must be aware of and understand the opportunities and challenges for pharmacists. We need to support all members as they navigate major changes in the structure, integration and delivery of NHS services. Community colleagues face particular challenges and we must support them and advocate for them to be part of the change as new services like Pharmacy First are initiated while the workload increases and pharmacies continue to close. I will work across the profession to ensure we can develop a properly funded integrated approach to patient care, including more support for clinical roles in community and the needed major changes in education and credentialing.

2. The RPS ceased to be the regulator over a decade ago and therefore membership became optional. It has refused to publicly declare its membership numbers for several years, even when asked to do so at its own annual meetings. The membership figure of "26,137 paying members" was given in the RPS Annual report 2022 and this is a rare insight for members. What is your view on transparency and in particular the declaration of membership numbers in future?

We have been publishing our membership number in our annual report for the last few years.

3. Should the RPS membership base remain exclusively for pharmacists, pharmaceutical scientists, and pharmacy students/trainee pharmacists? Why?

I am a great supporter of pharmacy technicians and I should be very happy for it to be expanded if that is what pharmacy technicians would also like. The RPS are working very closely with APTUK for example on patient safety. APTUK do a wonderful job in representing technicians and we are both members of UKPPLAB. I think closer alignment could benefit patients the public and our two professions.

4. Pharmacy technicians undoubtedly have an important role to play in supporting pharmacists through skill mix. However, the government seems keen instead to introduce pharmacist role substitution for example by giving pharmacy technicians' the rights to operate Patient Group Directions (PGDs). What views do you hold on this subject and in particular, do you believe the pharmacy technicians have the appropriate levels of training to independently deliver PGDs?

Pharmacy technicians are vital for the provision of clinical pharmacy in every setting. They are a regulated profession in their own right and have a unique set of skills. Like pharmacists are not there to free up GP time, pharmacy technicians are not there to free up pharmacists' time but to work alongside them so both professions can work to the top of their license.

I am aware that PDA has a different view but I believe that with the right training pharmacy technicians can administer supply medicines using PGDs where appropriate for patients. Just like pharmacist prescribers won't be prescribing complex therapies on day one, pharmacy technicians will also work to their competency and within governance and regulatory arrangements.

5. Do you support the PDA's Safer Pharmacies Charter?

I agree with the principles of patient safety as described in the charter.

6. What are your views on the UK Pharmacy Professional Leadership Advisory Board installed by the 4 country Chief Pharmaceutical Officers?

I am proud to be a member of it and we had a really good first meeting. It's so good to get started on work with committed colleagues with a wide range of expertise and experience from across our two professions. The future is about working together for the good of patients, the public and pharmacy. We are better together and can represent pharmacy and enable professional leadership to be the best that it can be.