

# 'Pharmacist' title to remain restricted

The title 'pharmacist' will remain restricted to those who are on the register of the new General Pharmaceutical Council, it has been confirmed.

The Government's response to the consultation on the draft Pharmacy Order 2009 was published this month, detailing which proposals from the draft Order are to be implemented, and which will be modified.

The report states that the GPhC will not hold a non-practising register, but may hold lists of 'emergency registrants', — 'suitably experienced' people who will be able to be registered as pharmacists during an emergency.

Other proposals which were accepted include that the UK and Scottish Parliaments will have an enhanced role in the monitoring of the GPhC, and that the number of statutory committees will be reduced to three — appeals,

investigation and fitness to practise — with the provision to establish more as the GPhC considers appropriate.

The report also states that transitional arrangements will be put in place to allow registrants to transfer their records of continuing professional development from the Royal Pharmaceutical Society to the GPhC.

Respondents to the draft Order were generally supportive of the overall approach to establishing the GPhC, states the report, and 92% of respondents agreed that the main aim of the GPhC should be to set the importance of public protection and well-being.

A total of 195 responses to the consultation were received; four from members of the public, 143 from healthcare professionals and 48 from organisations, including the Guild of Healthcare Pharmacists (*BJ Clin Pharm* 2009;1:101).

David Miller, vice president of the Guild told *The British Journal of Clinical Pharmacy*: "In general, we agreed with many of the proposals first suggested, and are grateful that many of our comments have been acknowledged and, in part, addressed."

However, the Guild remains concerned that the burden of work required to serve on the GPhC will exclude active practitioners within the managed sector. "We await the outcome of the appointments process to see if the appointments commission can meet its brief to match the spread of expertise across the different sectors as well as society as a whole," said Mr Miller.

"We hope that many of our remaining, more detailed comments will be addressed in the subsequent rules," he added.

The report can be accessed at [www.dh.gov.uk](http://www.dh.gov.uk).

# New advice for implementing e-prescribing

Pharmacy departments may need to increase their staff level or re-structure their department as electronic prescribing is implemented, according to a new information resource from NHS Connecting for Health, which aims to support the implementation of e-prescribing. The report, entitled "Electronic prescribing in hospitals — challenges and lessons learned", points out that the time required to set up and maintain an e-prescribing system must be taken into account.

The resource is aimed at decision makers and others who are involved in implementing, supporting or using e-prescribing systems. Advice and ideas are presented based on the experiences of NHS staff who have already implemented e-prescribing systems.

Ann Jacklin, chief of service, pharmacy and therapies at Imperial College Healthcare



NHS Trust and a member of the project team who developed the resource, told *The British Journal of Clinical Pharmacy*: "Many sites that have implemented e-prescribing reported common experiences, so this

report provides a valuable resource which will help shorten the learning curve when implementing such systems."

The report is supported by shorter briefing documents aimed at specific staff groups including pharmacists. The pharmacy briefing document provides practical advice such as how to use e-prescribing software, how to implement the systems, how the data generated will be used to improve medicines management and what support services pharmacists will provide during the implementation phase and beyond. Although widely used in primary care, e-prescribing systems are less widespread in secondary care.

"I would encourage staff who use e-prescribing in any area of practice to use the document. The lessons can be applicable to all types of prescribing, not just when applied to the system as a whole," Ms Jacklin added.