

**THE PHARMACY PRACTICE RESEARCH
TRUST**

(Registered Charity No. 1076457)

Medicines & People

Turning knowledge into know-how

**Trustees' Report & Financial Statements
Year ended 31st August 2005**

haysmacintyre
Chartered Accountants
Registered Auditors

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LEGAL & ADMINISTRATIVE DETAILS

TRUSTEES	Mr Peter Curphey Mr Marshall Davies (Chair) Professor Brian Edwards (from March 2005) Ms Christina Funnell (from March 2005) Sir Graham Hart, KCB (until June 2005) Mr Bryan Hartley Dr Robert Maxwell, CVO CBE (until June 2005) Mr Hemant Patel (from June 2005) - Ex-officio Mr Kirit Patel Lord Peston of Mile End Dr Rebecca Rosen (from March 2005) Professor Michael Schofield, CBE Baroness Tonge of Kew (from March 2005) Mr Nicholas Wood (until May 2005) – Ex-officio
TRUST DIRECTOR	Sue Ambler
RESEARCH MANAGER	Zoe Whittington
RESEARCH OFFICER (from December 2004)	Beth Allen
DEVELOPMENT & FUNDRAISING OFFICER (until December 2004)	Kerry Crabb
RESEARCH & DEVELOPMENT ADMINISTRATOR (from January 2005)	Lyn McCulloch
TEAM SECRETARY (from January 2004)	Florita Sanz
REGISTERED CHARITY No.	1076457
PRINCIPAL ADDRESS	1, Lambeth High Street London SE1 7JN
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Chairman's Foreword

Building on the firm foundations from last year we have made significant progress in this reporting period towards our key objectives. This is reflected in the number and value of grants made and in the quality of the reports published and events held. We have engaged many different audiences in discussion and debate about the implications of our findings and in meeting our stated aim of turning knowledge into know-how.

Our work on supplementary prescribing in pharmacy, funded with a grant from Boots The Chemists and undertaken by Marjorie Weiss and her team at the University of Bath, is almost complete. It is producing insights into the initial implementation of what is a pivotal professional development for pharmacists and an important link in the policy to widen access to medicines. Karen Hassell and her team at the University of Manchester completed recruitment of the 2006 graduate cohort to our ground breaking longitudinal study of early careers in pharmacy and began work on the first survey exploring career choices and expectations.

With the continued help of the Leverhulme Trade Charities Trust we have supported a total of 8 community pharmacists to take their first steps in research. It is anticipated that, in the long term, this investment will make a contribution to the important academic workforce capacity building agenda supporting the University departments to meet their commitments to both research and teaching in pharmacy.

Our biennial research seminar in May 2006 will provide an opportunity for all our researchers to come together to celebrate the research produced and the career successes achieved – particular note should be made of Tabassum Jafri one of the 2003 bursary holders who has taken up a PhD place at the University of Cambridge studying risk in the medication process. This event offers policy makers, academics and our students an opportunity to discuss and reflect on the emerging results from many of our grants and to meet the grant holders.

The Trustees have progressed their long term ambition to identify and fund high quality, relevant and timely research the results from which will help policy makers, employers and practitioners plot a course through the competing demands on resources and to commission safe and effective services from pharmacists and other healthcare professionals in relation to medicines. Results that will help practitioners to understand and work effectively with patients to get the best from the medicines that they prescribe.

Our education programme and the new grant to evaluate implementation of the new community pharmacy contract in England and Wales will provide opportunities to discuss and debate innovation in professional education and

commissioning of pharmacy services. The Trustees are reviewing their communications strategy and will be looking to set in place a significant programme of events and meetings to discuss and consider the results as they emerge – the timely use of results is an important area of commitment for us as a Board.

The extent and pace of change in healthcare delivery, organisation and policy is a challenge for us and for our researchers – with the continued support of all our steering group members and peer reviewers we have ensured that the research teams receive thoughtful, practical and helpful feedback and comment. On behalf of the Board I would like to thank everybody who has given time, energy and thought to deliver high quality, timely and relevant results.

The continued support of the RPSGB with grants for research, communications, the use of accommodation and the secondment of staff has allowed us to carry forward an ambitious programme of funding - we would like to thank the members of the Council at the RPSGB and our other sponsors for their continued support.

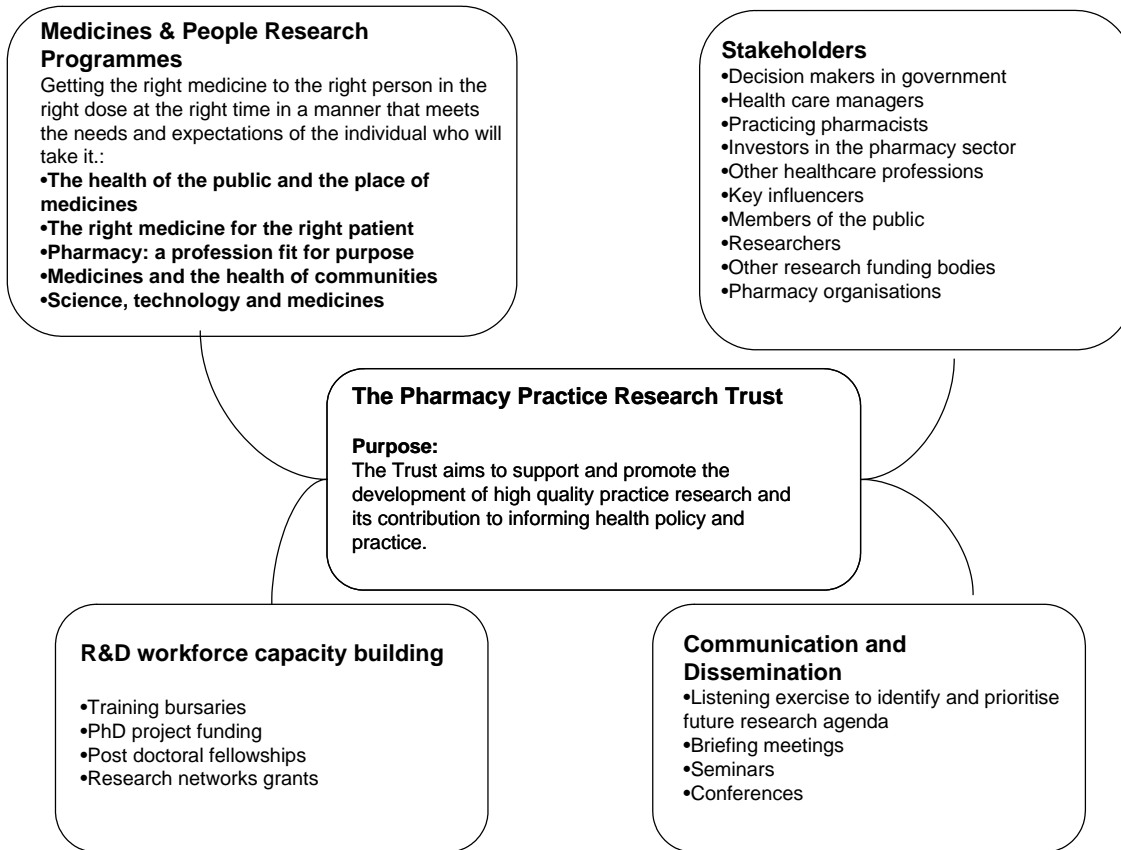
Finally, I would like to add a personal note of thanks to Graham Hart and Robert Maxwell, two of our founding Trustees who retired from the Board this year. Without their sustained efforts over the crucial initial years of establishing the Trust and putting its affairs on a strong footing the current programme of work would not have been possible.

Marshall Davies
Chairman of the Board of Trustees
March 2006

TRUSTEES' REPORT

1. The Trust & its activities

The Trust aims to support and promote the development of high quality research relating to the professional practice and performance of pharmacists and the delivery of safe, patient focused services by the pharmacy workforce. It seeks to achieve this in a number of ways:



1.1 Medicines & People Programme

Through their **Medicines and People Programme** the Trustees are committed to creating knowledge that “*ensures that the right person gets the right medicine at the right time in a manner that meets the needs and expectations of the individual who will take it*” and to ensuring that this knowledge is used appropriately to inform and shape policy and practice relating to medicines and their use.

The **Medicines and People Programme** aims to increase understanding and improve the ways in which medicines are prescribed, funded, distributed, administered and used. Reflecting government policy, which is increasingly requiring

pharmacists to enhance their contribution to the clinical care and safety of patients, the Trust has established a fifth programme theme (Programme 3) – *Pharmacy: a profession fit for purpose*. This theme will develop evidence about the major changes that are expected to occur in the composition and structure of the profession of pharmacy and its regulatory frameworks. This theme is funded with a three year programme grant from the Royal Pharmaceutical Society of Great Britain to look specifically at workforce, education and ethics in pharmacy.

The Trustees are committed to disseminating the results from research that they fund as effectively as possible to ensure that the knowledge is turned in to know how and used to make evidence-based changes to policy, practice and services.

The **Medicines and People Programme** addresses 5 related themes:

Programme 1 - The health of the public and the place of medicines will help us to understand the beliefs, expectations, skills, knowledge and competencies of the people who use and take medicines - the patients and their carers as well as the healthcare professionals.

Programme 2 - The right medicine for the right patient: preventing medication errors will help us to understand the basis of clinical practice and services and the regulation and governance of the system.

Programme 3 - Pharmacy: a profession fit for purpose will inform the development of the contribution which pharmacy makes to the provision of high quality patient centered care. This programme is split into three areas – workforce, education and ethics.

Programme 4 - Medicines and the health of communities will explore medicines and their place in addressing the wider health agenda relating to public health and tackling inequalities.

Programme 5 - Science, technology and medicines will highlight how well the different systems meet the changing expectations of society and accommodate the challenges of a rapidly evolving scientific and technological agenda.

Why Medicines and People?

Medicines are the most common form of treatment used in the NHS and by the public in treating self-limiting, common ailments – it is estimated that at any one time 70% of the population is taking medicines to treat or prevent ill health or to enhance their health. In 2004 it is estimated that the NHS spent £10.7 billion on NHS medicines. More prescriptions are being issued every year. Over the past decade, the annual number of prescription items per person in the UK has risen from 9 to

more than 12.¹ On top of this the public spent an additional £2,022 million on over-the-counter medicines in the UK.² Research and development expenditure by the pharmaceutical industry ran to £3,244 million.³

Despite this significant investment in developing, testing and purchasing medicines, comparatively little investment is made in understanding the systems which govern the way medicines are selected, dispensed, supplied, administered and taken.

At a time when patient safety is paramount the investment now being made by and through the Trust in exploring medicines and people is indeed timely. Knowledge about people's beliefs, expectations, skills and attitudes in relation to the medicines which they prescribe, dispense, administer and take will provide the insight necessary to design innovative new practices and services to make sure these processes are carried out safely and appropriately. Better understanding of the systems and practices themselves will be crucial in responding to calls for improvements to regulation and governance to ensure patient safety and the delivery of consistently high qualified services.

1.2 Delivering knowledge and know-how

Building research capacity & capability

The Trustees recognise that as in any field of academic endeavour, the quality of the research produced relies heavily upon the availability of a properly equipped research workforce. The Trustees are therefore committed to supporting the development and training of the research workforce, particularly in pharmacy practice based research groups. In addition the Trust has a specific programme of research training grants and bursaries, funded with grants from the Leverhulme Trade Charities Trust and the RPSGB.

Building partnerships – developing know-how

The Trustees are committed to working with other stakeholders in order to turn the knowledge into know-how which improves policy, practice and services and supports the process of innovation in healthcare. The Trust is always looking to work closely with potential sponsors to identify and develop workable projects and to engender ownership of the results. The Trustees aim to involve all stakeholders and sponsors in at least one event to discuss emerging and final results from the projects funded by the Trust.

¹ Medicines for Health: Understanding the 2005 PPRS. Industry Briefing. The Association of British Pharmaceutical Industry. 2005.

² <http://www.pagb.co.uk/pagb/primarysections/marketinformation/otcmarketgrowth.htm#2004>

³ <http://www.abpi.org.uk/statistics/section.asp?sect=3#13>

2. Medicines & People – highlights 2004/05

The Trustees published 2 final reports, hosted 1 event and funded 4 new projects in 2004/05. The current portfolio of projects includes 4 project grants, 3 research awards⁴ and 1 bursary⁵.

2.1 Completed projects

Programme 1: The health of the public and the place of medicines

Patient and professional models of depression and its treatment

Depression is an extremely common condition in general practice, and the cause of extensive morbidity within the general population. The aim of this research was to increase understanding of how doctors and patients perceive and communicate about depression, and the extent to which patients feel able and willing to participate in discussions and decisions about treatment.

The research was undertaken in collaboration with the Depression Alliance, and involved a qualitative, interview based investigation of the ways in which patients, doctors and community pharmacists understand, assess and respond to depressive illness and its treatment.

It is hoped that this research will contribute to the development of a more responsive service for people suffering from depression, and so, in turn, to the more effective use of anti depressant medication through enhanced concordance between health professionals and patients.

Janet Grime & Kristian Pollock, Medicines Management, Keele University

<i>Start date</i>	-	<i>September 1999</i>
<i>Completion date</i>	-	<i>October 2004</i>
<i>Funding</i>	-	<i>£250K, Department of Health</i>
<i>Status</i>	-	<i>Completed</i>

Concordance in community pharmacy: exploring and evaluating the theory in practice

This project explored an innovative model of service delivery and patient-pharmacist consultations within the community pharmacy environment to assess the feasibility

⁴ The Galen Award (£10,000) - funded from a bequest by Rowland Henry Williams to the Royal Pharmaceutical Society of Great Britain and the Sir Hugh Linstead Fellowship (£40,000) – funded by a grant from the Leverhulme Trade Charities Trust.

⁵ Bursary Scheme - funded by a grant from the Leverhulme Trade Charities Trust.

of applying a concordant consultation model in practice. The project involved an ethnographic methodology through observing practice within two community pharmacies followed by interviews with patients and community pharmacists. The research also tested out the role of community pharmacy within an existing primary care research network.

Tim O'Donaghue and John Foreman, Greenlight Pharmacy

Start date - April 2004
Completion date - March 2005
Funding - £17K, 2003 Sir Hugh Linstead Award
Status - Completed

Programme 2: The right medicine for the right patient

A qualitative investigation of the underlying causes of drug related morbidity in primary care resulting in hospitalisation

Since the publication of *An Organisation with a Memory* there has been increasing emphasis on the investigation of system failures as a method for understanding why errors occur in the NHS and how they might be prevented. This study will explore system failures which lead to preventable drug-related admissions from primary care. This will be a primarily qualitative study, looking at reasons why drug-related morbidity occurs in primary care from the perspective of the patient and general practice or primary care team. Data will be collected from a number of sources including hospital and primary care medical records, interviews with patients, and interviews with general practice staff and community pharmacists. This work will be published in the next reporting year.

Rachel Howard, Nottingham Primary Care Research Partnership

Start date - October 2003
Completion date - June 2005
Funding - £9.94K, 2003 Galen Award
Status - Completed

Programme 3: Pharmacy: a profession fit for purpose

Teaching, learning and assessment methods in pharmacy undergraduate programmes

The Pharmacy Education R&D Reference Group identified that many Schools of Pharmacy were developing teaching, learning and assessment methods in different ways. It recognised that it is important to learn from these initiatives in order to

develop best practice in pharmacy education and to inform the Society's regulatory role as it relates to accreditation of degree programmes and pre-registration training.

This project provides a map of current undergraduate pharmacy education across the UK in relation to learning, teaching and assessment methods. An analysis of the situation in pharmacy in comparison with medicine is also presented as well as analysis of student experiences of learning and assessment, examples of innovation and good practice and policy implications of the findings in terms of the degree accreditation process and Department of Health agenda for health professional education. This report will be published in the next reporting year

Prof Keith Wilson, Head of Pharmacy, Aston University

Start date - *December 2003*
Completion date - *March 2005*
Funding - *£60K, RPSGB*
Status - *Completed*

Skill mix in community pharmacy: exploring and defining the roles of dispensary support staff

Within community pharmacy, trained pharmacists, technicians, dispensing assistants and medicines counter assistants provide different levels of skill mix. Skill mix has yet to be explored in any great detail in community pharmacy practice, though it has been successfully implemented in hospital pharmacy. A number of key drivers, such as the RPSGB's intention to register and regulate all pharmacy technicians and the Department of Health's position on extending the roles of support staff are adding to the need to know more about the views and expectations of support staff.

The report clarifies and describes the range and diversity of tasks undertaken by dispensary support staff in community pharmacy, identifies factors likely to affect skill mix profiles and provides recommendations on how skill mix developments could be implemented in practice. It involved qualitative and quantitative research with cases studies looking at a number of different community pharmacy settings followed by a survey. This report has been published.

Rachel Mullen, School of Pharmacy & Pharmaceutical Sciences, University of Manchester

Start date - *March 2003*
Completion date - *Sept 2004*
Funding - *£30K, 2002 Sir Hugh Linstead Award*
Status - *Completed – Published, January 2005*

An exploration of the diversity and complexity of the pharmacy locum workforce

The aim of this project is to provide some insights into the nature of the work locums undertake and the reasons behind why such a large section of the pharmacy workforce is employed in a locum capacity. This will provide valuable information regarding the nature and patterns of work of this flexible workforce, aiding the workforce planning process both for the pharmacy profession and employers of pharmacists, and for policy makers charged with developing and modernising the health care workforce. This report has been published

Dr Karen Hassell, Drug Usage and Pharmacy Practice Group, School of Pharmacy, University of Manchester

<i>Start date</i>	-	<i>July 2003</i>
<i>Completion date</i>	-	<i>March 2004</i>
<i>Funding</i>	-	<i>£54K, RPSGB</i>
<i>Status</i>	-	<i>Completed – Published, October 2004</i>

Functional and Occupational map

Following on from research in workforce and education, the Trust, in collaboration with Skills for Health (Sector Skills Council), commissioned work that will define occupations and functions (work activities) which make up the pharmacy sector. The sector spans a range of different employers, with both public and private funding structures, and a wide range of occupations and functions, many of which overlap with other professional groups. In addition, for many of the work functions the responsibilities within the work team are shared. The need to map the range of different occupations and functions is essential to informing the definition of qualifications and to setting standards of practice (and services) across the sector.

The outputs from this piece of work are:

- An occupational map of the pharmacy domain – to assist stakeholders in identifying the current position and highlight any gaps in the framework of career development pathways and qualifications.
- A functional map of the pharmacy domain - to identify any relevant occupational standards that pharmacy might wish to use or develop in any future qualification framework. This will provide stakeholders with clear information about the size and scope of further standards development work in either practice or education.
- A document detailing further work to develop standards.

Further work to develop National Occupational Standards for Pharmacy will now be based on the map, by Skills for Health. The Society will use the map to inform revisions of its education standards.

Rodney Amster, 5S Consulting

<i>Start date</i>	-	<i>September 2004</i>
<i>Completion date</i>	-	<i>March 2005</i>
<i>Funding</i>	-	<i>£25K, £15K from RPSGB & £10K from Skills for Health</i>
<i>Status</i>	-	<i>Completed</i>

Programme 4 – Medicines and the health of communities

Pharmacy's contribution to tackling health inequalities

The team at the University of Bristol looked at pharmacy's contribution to tackling health inequalities. The three areas of the project were:

- A scoping review of the research evidence relating to social exclusion, health inequalities and the role of the community pharmacy.
- Exploring the direct and indirect evidence that is available on pharmacy's contribution to community health.
- Identifying how professional developments might contribute to tackling social exclusion, and what the implications of these developments may be for wider professional debates.

The project outcomes will be used to provoke thought and try to influence other research, perhaps relating to the new pharmacy contract.

Lesley Doyal, School for Policy Studies, University of Bristol

<i>Start date</i>	-	<i>September 2003</i>
<i>Completion date</i>	-	<i>January 2004</i>
<i>Funding</i>	-	<i>£10K, RPSGB</i>
<i>Status</i>	-	<i>Completed</i>

2.2 Events

Implementing the new contractual framework for community pharmacy; emerging workforce trends - Friday 13th May 2005

The new Contractual Framework for Community Pharmacy moves the provision of pharmacy services towards a quality rather than quantity focused outcome and should enable community pharmacies to provide a greater range of services and be rewarded for the range and quality of those services, as well as be an integral part of

the NHS family in providing primary care and community services. The new contract opens up a possibility of pharmacists developing their contribution to wider health and social policy, particularly through provision of advanced level services.

Successful implementation of the new contractual framework will require engaging the community pharmacy workforce in taking on new roles, developing services and their relationships with primary care colleagues.

Key stakeholders from primary care organisations such as NatPaCT, National Prescribing Centre, NHS Confederation and Department of Health attended the event at the British Medical Association to inform strategic thinking around the implementation of the new contractual framework for community pharmacy.

A significant amount of research, funded by the Pharmacy Practice Research Trust, RPSGB and the Department of Health, has been completed over the past two years looking at the pharmacy workforce and new ways of contracting. The event explored these findings in relation to the implementation of the new pharmacy contract.

Presentations were given from:

Mr St John Deakin, Chairman, Bassetlaw Primary Care Trust, NHS Confederation Negotiating Team – Overview of the New Contractual Framework for Community Pharmacy.

Dr Karen Hassell, Director of Centre for Pharmacy Workforce Studies, School of Pharmacy, University of Manchester – The community pharmacy workforce: who are they?

Dr Sue Ambler, Head of Research and Development, RPSGB & Member of Pharmacy Workforce Planning and Policy Advisory Group – Community Pharmacy Workforce: what do they want?

Professor Jenny Tann, University of Birmingham and Caret – Implementing the New Contractual Framework for Community Pharmacy – Emerging Workforce Trends: Innovation in Community Pharmacy.

Dr Darren Ashcroft, Senior Clinical Lecturer, School of Pharmacy and Pharmaceutical Sciences, University of Manchester – Lessons from the Local Pharmaceutical Services (LPS) Evaluation.

Presentations were followed by an open discussion forum chaired by Ms Helen Northall, Development Lead for Primary Care Contracting.

The audience broke into small groups and discussed what to communicate to PCTS to engage them on the issues raised. A short briefing for PCTs/Professional

Executive Committees was drafted from the feed back provided by the groups. This briefing paper is available at: www.primarycarecontracting.nhs.uk. It was also distributed via the NHS Primary Care Contracting team and trust networks.

2.3 Ongoing projects

Programme 1: The health of the public and the place of medicines

Investigating factors influencing user choices to visit either general practitioners or community pharmacists in the management of minor ailments

This project will elicit user preferences influencing choices to visit general practitioners or community pharmacists to deal with minor ailments. The project will test the feasibility of using a discrete choice experiment and pilot this method. This research will explore what attributes influence user choices to consult a community pharmacist, the weight they attach to those attributes and the trade-offs they make. This research could inform service developments in community pharmacy by allowing tailoring and targeting of innovations.

Dyfrig Hughes, University of Wales, Bangor

<i>Start date</i>	-	<i>January 2005</i>
<i>Completion date</i>	-	<i>February 2006</i>
<i>Funding</i>	-	<i>£14.5K, 2004 Galen Award</i>
<i>Status</i>	-	<i>Ongoing</i>

Supplementary Prescribing: Patient and Pharmacist Perspectives

Supplementary prescribing is defined as “a voluntary prescribing partnership between an independent prescriber (a doctor or dentist) and a supplementary prescriber (a pharmacist, nurse or midwife) to implement an agreed patient-specific Clinical Management Plan with the patient’s agreement”. It is intended to provide patients with quicker and more efficient access to medicines and to make the best use of the skills of trained pharmacists, nurses and midwives. Over time it is likely to reduce doctors workload, freeing up their time to concentrate on patients with more complicated conditions and complex treatments.

Boots The Chemists have highlighted supplementary prescribing as an innovation that they intend to progress and have identified a number of pharmacists who will participate in the first wave of training for supplementary prescribing.

Marjorie Weiss, Department of Pharmacy and Pharmacology, University of Bath

<i>Start date</i>	-	<i>October 2004</i>
<i>Completion date</i>	-	<i>October 2005</i>

Funding - £50K, Boots The Chemists
Status - Ongoing

Programme 2: The right medicine for the right patient

Investigation into the quality and standard of pharmaceutical care provision to drug misusers and development of a good practice model

This project will inform the development of pharmaceutical services which are essential to delivering the targets of the national Drugs Strategies of the UK. Community pharmacists play an important role in the delivery of drug treatment and service provision. Through qualitative methodologies this project will identify and describe factors that promote and inhibit community pharmacists' involvement in service provision, identify and describe variations in service provision by community pharmacists and compare against good practice standards and ascertain the views of service users on the pharmaceutical service provision experienced.

Rachel Britton, Department of Pharmacy and Pharmacology, University of Bath

Start date - October 2003
Completion date - January 2006
Funding - £13K, 2003 Sir Hugh Linstead Fellowship
Status - Ongoing

Programme 3: Pharmacy: a profession fit for purpose

Pharmacy workforce: a longitudinal study of careers amongst new pharmacy graduates (2004-2009)

This study will follow a cohort of 2006 pharmacy graduates through the initial career choices made whilst in undergraduate education, pre-registration training and early years in practice. It will generate data relating to career, employment and training choices and will track changes in motivations and aspirations. The longitudinal nature of the study will allow mapping of changes and identification of trends as they emerge. It will also allow exploration of specific career issues such as the impact of student debt. This research will inform our understanding of what influences decisions that pharmacists make in the early stages of their careers and the impact these decisions have on future careers.

In addition to work with the 2006 graduate cohort the study was extended in 2004 to allow the research team to pilot recruitment and retention strategies and questionnaires with the 2004 graduate cohort. This additional work will produce useful, if limited, early results that can be published.

Dr Karen Hassell, Drug Usage and Pharmacy Practice Group, School of Pharmacy, University of Manchester

Start date - *January 2004*
Completion date - *February 2009*
Funding - *£350K, RPSGB*
Status - *Ongoing*

Pharmacy undergraduate students: career choices and expectations across a four-year degree programme

This piece of work will help to develop a wider understanding of the future profile of the pharmacy workforce by focusing on the career aspirations, motivations and expectations of *current* pharmacy students and the career choices that they are making. This project will inform workforce planning and policy, and developments in pharmacy education.

Prof Keith Wilson, Head of Pharmacy, Aston University

Start date - *December 2003*
Completion date - *June 2005*
Funding - *£60K, RPSGB (£40K from PWPPAG⁶)*
Status - *Ongoing*

Working patterns of female community pharmacists over the age of 30: an exploration of the factors that motivate working practice

The Pharmacy Workforce Census identified that 53% of the register of pharmacists are female and that some women tend to work part-time once they reach their 30s. Little is known about what motivates women over the age of 30 to adopt their chosen working patterns. The aims of this research are to explore the reasons why female pharmacists adopt their chosen working patterns and to identify the factors, which influence these choices. The study will use a two-stage methodology with qualitative work in the form of interviews generating a set of statements which will then be tested using Q methodology to quantify and categorise the opinions of a sample of female pharmacists.

Wendy Gidman, University of Manchester

Start date - *January 2005*
Completion date - *June 2006*
Funding - *£35.5K, 2004 Sir Hugh Linstead Fellowship*
Status - *Ongoing*

⁶ PWPPAG – Pharmacy Workforce Planning and Policy Advisory Group.

Programme 4: Medicines and the health of communities

Currently no ongoing projects.

Programme 5: Science, technology and medicines

Genetics, genomics and medicines: a discussion paper

This paper will provide a brief overview of the science and technological context but will then go on to discuss the implications for the delivery of health care and professional practice and more widely for social, health and economic policy. This paper will be used to inform the forthcoming R&D agenda setting exercise and to engage the wider stakeholder groups in the work of the Trust and its M&P Programme.

Dr Paul Martin, Institute for the Study of Genetics, University of Nottingham

<i>Start date</i>	-	<i>June 2004</i>
<i>Completion date</i>	-	<i>February 2005</i>
<i>Funding</i>	-	<i>£10K, RPSGB</i>
<i>Status</i>	-	<i>Ongoing</i>

2.4 Building capacity

Evaluating the potential of genetic testing from community pharmacies

Dr Hussain has successfully completed his certificate year and has been building on his experience in research through learning about research question formulation, systematic search, the use of varied sources of evidence, statistics, planning change, implementing change and evaluating change.

In his interim report Dr Hussain reflects that “this course has enhanced my confidence in highlighting the potential of pharmacists. Especially in tutorial discussions I feel that people from a wide healthcare background appreciated the roles pharmacists can undertake to make health care cost-effective.”

Dr Majad Hussain, Department for Continuing Education, University of Oxford

<i>Start date</i>	-	<i>September 2003 (Awarded July 2003)</i>
<i>Completion date</i>	-	<i>August 2006</i>
<i>Funding</i>	-	<i>£12.15K, 2003 Research Training Bursary</i>
<i>Status</i>	-	<i>Ongoing</i>

Since the aim of the bursary scheme is to develop pharmacists who have basic experience and skills in health services research who will pursue research as part of

their practice the Trust is pleased to announce that Tabassum Jafri, 2003 Research Training Bursary holder is going on to undertake a PhD at the Engineering Department, Cambridge University (Lucy Cavendish College). The aim of Tabassum's project is to apply risk assessment practices to the medication provision process, either based on existing methods, or by adapting and tailoring new methods. A major case-study will be based around the provision of automation in hospital pharmacies.

Projects that also build capacity are those carried out by Dyfrig Hughes (Programme 1), Rachel Howard & Rachel Britton (Programme 2) and Rachel Mullen & Wendy Gidman (Programme 3).

3. Management of the Trust and Governance

In the period covered by this Report the Trust administered the funding of five grants secured in 03/04 – see section 3.3 for details – totaling some £1,061K. Aspects of risk and governance were reviewed in the reporting year 03/04 and the Trustees continued to review their responsibilities in 04/05.

3.1 Risk assessment

A risk assessment was conducted in 03/04 which identified a total of 9 areas relating to operational, financial, governance and management and reputational risk. A number of steps were set in train to mitigate these risks and the Trustees are satisfied that

“the major risks to which the Trust is exposed, as identified by the Trustees, have been reviewed and that systems have been established to mitigate those risks”.

3.2 Code of Conduct

A Code of Conduct was drafted in 03/04 which included agreeing that each Trustee would serve a three year term of office which could be renewed twice. The size and composition of the Board was also reviewed and a programme to identify and appoint new Trustees was set in train to ensure that the backgrounds and expertise amongst members of the Board appropriately reflected the new responsibilities and that an element of succession planning could be developed. To this end four new Trustees were appointed in 04/05, as well as the RPSGB President of the day as an ex-officio member of the Board:

Professor Brian Edwards (from March 2005)
Ms Christinal Funnell (from March 2005)
Mr Hemant Patel (from March 2005) - Ex-officio
Dr Rebecca Rosen (from March 2005)
Baroness Tonge of Kew (from March 2005)

The Trustees also reviewed the provision of research advice to the Board, especially in relation to specific projects and grant making and have established a number of project steering groups to monitor progress of funded projects. A list of the advisors is provided in Section 3.6.

3.3 Grants received 2004/05

The Trust was established by the Royal Pharmaceutical Society of Great Britain with the following objects:

- a) The relief of sickness generally in the United Kingdom and, in particular, but not so as to limit the generality of the foregoing.
- b) To promote research into the practice of Pharmacy in the United Kingdom and to publish the useful results of such research.
- c) To promote the health of the public by educating pharmacists in order to improve the standard of health care available to the public.
- d) To advance and promote knowledge and skill in relation to the practice of pharmacy for the public good.

In order to meet these objects the Trustees administered the following grants in 2004/05:

From the RPSGB:

- A restricted programme grant of £600K over three years (2004-2006) to fund work in Programme 3: *Pharmacy: a profession fit for purpose*
- A restricted project grant of £30K over three years (2004-2006) to fund the Galen Award (a pharmacy practice research project grant)
- An unrestricted grant of £186K over three years (2004-2006) to run the Trust including publication and dissemination costs

From the Leverhulme Trade Charities Trust:

- An annual restricted project grant of £120K over three years to fund the Sir Hugh Linstead Fellowship (2004-2006)
- A restricted grant of £75K to fund Research Training Bursary Scheme in community pharmacy

From Boots The Chemists:

- A restricted project grant of £50K to fund an evaluation of the implementation of supplementary prescribing in pharmacy

In addition the RPSGB provides the following support for the Trust which appear in the annual accounts of the Trust as a "Gift in Kind":

- Staff time to support the Trustees in their work and
- Office accommodation (and associated overhead costs)

3.4 Reserves policy

Reserves at the year end stood at a level which is sufficient, with on-going support from the Society, to sustain the Trust's current level of activities. It is anticipated that the scope and level of operation will, as indicated above, expand as further funds are raised.

3.5 Grant making 2004/05

The Trustees made the following grants and awards in 2004/05:

Programme 1 – The health of the public and the place of medicines

Investigating factors influencing user choices to visit either general practitioners or community pharmacists in the management of minor ailments

Dyfrig Hughes, University of Wales, Bangor

<i>Start date</i>	-	<i>January 2005</i>
<i>Completion date</i>	-	<i>February 2006</i>
<i>Funding</i>	-	<i>£14.5K, 2004 Galen Award</i>
<i>Status</i>	-	<i>Ongoing</i>

Supplementary Prescribing: Patient and Pharmacist Perspectives

Marjorie Weiss, Department of Pharmacy and Pharmacology, University of Bath

<i>Start date</i>	-	<i>October 2004</i>
<i>Completion date</i>	-	<i>October 2005</i>
<i>Funding</i>	-	<i>£50K, Boots The Chemists</i>
<i>Status</i>	-	<i>Ongoing</i>

Programme 3 – Pharmacy: a profession fit for purpose

Working patterns of female community pharmacists over the age of 30: an exploration of the factors that motivate working practice

Wendy Gidman, University of Manchester

Start date - *January 2005*
Completion date - *June 2006*
Funding - *£35.5K, 2004 Sir Hugh Linstead Fellowship*
Status - *Ongoing*

Functional and Occupational map

Rodney Amster, 5S Consulting

Start date - *September 2004*
Completion date - *March 2005*
Funding - *£25K, £15K from RPSGB & £10K from Skills for Health*
Status - *Completed*

3.6 Trustees and advisors

The Trust consists of a small Board of Trustees chaired by Sir Graham Hart (until June 2005) and subsequently Mr Marshall Davies and supported by a small secretariat drawn from amongst the staff of the R&D Division at the Royal Pharmaceutical Society of Great Britain.

In order to discharge their responsibilities in relation to grant making and project management/oversight the Trustees appointed the following advisors:

Pharmacy Workforce: a longitudinal study of careers amongst new pharmacy graduates (2004-2008) – Steering Group Members

Meet:	Once a year
Last Met:	27 th June 2005
Kate Purcell (Chair)	Director, Employment Studies Research Unit, UWE
Sue Ambler	Director, Pharmacy Practice Research Trust
Zoe Whittington	Research Manager, Pharmacy Practice Research Trust
Phil Green	Director of Education & Registration, RPSGB
Lorelei Cooke/Tania Fisher	Health Policy and Economic Research Unit, British Medical Association
Sarah Robinson	Nursing Research Unit, King's College London

Niall Kealy	Member of 2006 graduating cohort and BPSA Executive
Marshall Davies	Trustee, Pharmacy Practice Research Trust
Peter Curphey	Trustee, Pharmacy Practice Research Trust
Jeanette Howe	Department of Health
Rob Darracott	Director, Corporate and Strategic Development
Research Team	University of Manchester

Pharmacy undergraduate students: career choices and expectations across a four-year degree programme & Teaching, learning and assessment methods in pharmacy undergraduate programmes – Steering Group Members

Meet: Twice a year
Last met: 20th May 2005

Philip Green	Director, Education and Registration, RPSGB
Rob Darracott (Chair)	Director, Corporate and Strategic Development
Trudie Roberts	Medical Education Unit, University of Leeds
Stuart Anderson	National Coordinating Centre for Service Delivery and Organisation, London School of Hygiene and Tropical Medicine
Chris Rostron	School of Pharmacy and Chemistry, Liverpool John Moores University and Chair of the Academic Pharmacy Group, RPSGB
James Wood	BPSA President
Sue Ambler	Trust Director, Pharmacy Practice Research Trust
Kirit Patel	Trustee, Pharmacy Practice Research Trust
Research Team	Aston University

Functional and Occupational Map

Meet: Twice a year
Last Met: 17th May 2005

Sue Ambler	Trust Director, Pharmacy Practice Research Trust
Bryan Hartley (Chair)	Trustee, Pharmacy Practice Research Trust
Michelle Logan/Avis Mulhearn	Skills for Health
Helen Howe/Kay Buttars	Pharmacy Department, Addenbrookes NHS Trust
Pat Oakley	King's College London
Gerald Alexander	Council Member, RPSGB
Keith Wilson	Head of School, Pharmacy, Aston University
Peter Curphey	Trustee, Pharmacy Practice Research Trust
Researchers	5S Consulting

Supplementary Prescribing: Patient and Carer Perspectives

Meet: Twice a year
Last Met: 15th April 2005

Sue Ambler (Chair)	Director, Pharmacy Practice Research Trust
Dr Sue Latter	Reader, School of Nursing and Midwifery, University of Southampton
Heather Gray	Pharmaceutical Advisor, NatPaCT, and Chief Pharmacist, South East Herts PCT
Peter Wilson	Head of Post-registration Education, RPSGB
Diana Thurston	Head of Strategic Professional Development, Pharmacy Superintendent's Office, Boots The Chemists
Marjorie Weiss	Lead Researcher, Bath University
Tony Avery	Professor of Primary Care, University of Nottingham
Dave Pruce	Director of Practice Quality Improvement, RPSGB

Research Awards Panel

Meet: Once a year
Last Met: 18th August 2005

Marshall Davies (Chair)	Trustee, Pharmacy Practice Research Trust
Bryan Hartley	Trustee, Pharmacy Practice Research Trust
Judy Cantrill	School of Pharmacy and Pharmaceutical Sciences, University of Manchester
Catherine Duggan	Academic Department of Pharmacy, Barts and the London NHS Trust
Peter Knapp	School of Healthcare, University of Leeds

Research Training Bursary Panel

Meet: Once a year
Last met: 17th August 2005

Marshall Davies (Chair)	Trustee, Pharmacy Practice Research Trust
Bryan Hartley	Trustee, Pharmacy Practice Research Trust
Karen Hassell	Research Fellow, University of Manchester
Marjorie Weiss	Senior Lecturer, University of Bath
Sue Ambler	Director, Pharmacy Practice Research Trust

Combined Awards and Bursary Panel

Meet: Once a year
Last met: 5th October 2004

As above, but chaired by Professor Michael Schofield, Council Member, RPSGB.

4. Plans for 2005/06 and beyond

4.1 Future grants and calls for proposals

Applications invited for the 2005 Practice Research Awards and Bursary Scheme

The Pharmacy Practice Research Trust invited applications for the 2005 Practice Research Awards in January 2005.

There were 14 applicants for the awards of which 6 were shortlisted for interview (3 Linstead applications, 3 Galen). The Research Awards Panel met on the 18th August 2005 and made the following recommendations:

Galen Award 2005:

Living with antedementia medicines: patient and carer perspectives

Miss Denise Taylor, University of Bath [£8,170]

Sir Hugh Linstead Award 2005:

Evaluation of an alcohol screening service in community pharmacy

Miss Ranjita Dhital, Substance Misuse Service, Central and North West London Mental Health NHS Trust [£31.5K]

The role of the Welsh language in community pharmacy service provision in Wales

Dr Louise Hughes, Welsh School of Pharmacy, Cardiff University [£5K]

Why is pharmacy based needle exchange failing to expand in response to increasing need and how can this be overcome?

Dr Jennifer Scott, Department of Pharmacy and Pharmacology, University of Bath [£5K]

Research Training Bursary Scheme 2005

Through funding from the Leverhulme Trade Charities Trust the Pharmacy Practice Research Trust offers a Research Training Bursary Scheme. The money is targeted to individual community pharmacists who demonstrate a real need for external

support to develop their skills and careers in research. Community pharmacists, self-employed or employed by a small chain, are eligible to apply for these bursaries.

Previously, the funding has been provided to undertake a non-pharmacy MSc. The Trust reviewed this bursary scheme to explore new ways to effectively utilise the funding to develop research capacity amongst community pharmacists. It was recognised that the MSc funding offered may be at too advanced a level for the majority of community pharmacists eligible for the funding and a number of research funding levels were developed:

Level 1 - funding to undertake research modules and a small scale project (supported by a research organisation, for example, a Higher Education Institute, Primary Care Research Network or Research & Development Unit). This would cover tuition fees, locum costs/salary replacement, research costs, supervision costs and conference attendance.

Level 2 - funding to upgrade a Diploma in Clinical/Community Pharmacy to a MSc, which usually involves undertaking a further two modules (one on research methods) and undertaking a project. This would cover tuition fees, locum costs/salary replacement, research costs, supervision costs and conference attendance.

Level 3 - funding to undertake a non-pharmacy MSc. This would cover tuition fees, locum costs/salary replacement, research costs, supervision costs and conference attendance.

The Research Training Bursary Scheme was relaunched in April 2005 with the three new levels of funding. A total of 7 applications (one for Level 1, three for Level 2 and three for Level 3) were received. All three Level 3 applicants were shortlisted for interview (1 & 2 Level applicants were judged on the basis of their application only). The Research Training Bursary Panel met on the 17th August 2005 and made the following recommendations:

Level 1 Bursary on Research Methodology and Survey Design

Mrs Jessica Purkiss, Locum Community Pharmacist, Co. Durham [£4,985]

Level 2 Bursary to conduct an MPhil at the Graduate Research School, University of Sunderland

Mr John Hall, Community Pharmacist, Co. Durham [£12K]

Level 2 Bursary to carry out an MSc – Conversion from diploma in community clinical pharmacy

Miss Nazmeen Khideja, Pharmacy & Clinical Services Manager, Birmingham [£4.5K]

Level 3 Bursary to carry out an MSc in Health Psychology

Miss Anita Sharma, Self Employed Locum, Manchester [£38,160]

The final decision on the above successful applicants is to be ratified at the 27th Meeting of the Pharmacy Practice Research Trust Board of Trustees on 12th September 2005.

New Contractual Framework for Community Pharmacy

The need for research following the introduction of the New Contractual Framework for Community Pharmacy was identified by the Trust and subsequently funds were made available up to £140,000 for a research project exploring the implementation of the contractual frameworks for community pharmacy.

The call for proposals was announced at the stakeholder briefing, *Implementing the new contractual framework for community pharmacy; emerging workforce trends*, hosted by the Trust on 13th May. At this early stage the Trust is keen to identify factors that are helping or hindering development so that rapid feedback can help inform implementation. The research will explore the impact of the change on pharmacists, their teams and their primary care colleagues. The Trustees will look to support the change management process with key stakeholders.

Applicants were encouraged to include appropriate representation from healthcare professionals, patients and healthcare users.

6 applications were received by the closing date of 25th July and two applications have been shortlisted for interview by external reviewers. A formal decision will be made in early December 2005.

Learning from Innovation in Pharmacy Education

There is a need to develop a learning and reflective culture in pharmacy education and to encourage academics to evaluate and review developments in education provision. However, many academics cite lack of time and funding as barriers to exploration of the impact of educational developments. Therefore, the Trust put out a call for proposals on 3rd May to fund a series of small-scale studies designed to encourage pharmacy academics to evaluate and explore aspects of pharmacy education. Project proposals for up to £5,000 were invited from pharmacy education providers (undergraduate, pre-registration and post-registration) to undertake research evaluating any aspect of pharmacy education that will be completed by

October 2006. The Trust made £50,000 available for this area of research in total and will host a learning event in 2006 to share the results of these mini-projects.

17 applications were received by the deadline date of 18th July and ten applications were recommended by external reviewers. This decision will be ratified at the September Trust Board meeting.

4.2 Forthcoming publications

The following projects have completed and are expected to be published in the next reporting year:

Patient and professional models of depression and its treatment

This report will be broken up into a series of short reports available on the RPSGB website.

See section 2.1 for full details of the project.

Janet Grime & Kristian Pollock, Medicines Management, Keele University

<i>Start date</i>	-	<i>September 1999</i>
<i>Completion date</i>	-	<i>October 2004</i>
<i>Funding</i>	-	<i>£250K, Department of Health</i>
<i>Status</i>	-	<i>Completed</i>

A qualitative investigation of the underlying causes of drug related morbidity in primary care resulting in hospitalisation

This work is to a high standard and fits in well with previous work carried out relating to risk and will subsequently be published in the next reporting year.

See section 2.1 for full details of the project.

Rachel Howard, Nottingham Primary Care Research Partnership

<i>Start date</i>	-	<i>October 2003</i>
<i>Completion date</i>	-	<i>June 2005</i>
<i>Funding</i>	-	<i>£9.94K, 2003 Galen Award</i>
<i>Status</i>	-	<i>Completed</i>

Teaching, learning and assessment methods in pharmacy undergraduate programmes

See section 2.1 for full details of the project.

Prof Keith Wilson, Head of Pharmacy, Aston University

<i>Start date</i>	-	<i>December 2003</i>
<i>Completion date</i>	-	<i>March 2005</i>
<i>Funding</i>	-	<i>£60K, RPSGB</i>
<i>Status</i>	-	<i>Completed</i>

4.3 Communications and dissemination

The Trustees will be looking to develop current partnerships and to build new ones with stakeholders. The Trustees will host a number of events in 2005 relating to each of the five *Medicines and People* themes.

The emerging communication strategy for the Trust will be based on the following principles:

- i) the findings should be presented in ways that are clearly understood by non-specialist audiences;
- ii) any event should aim to provoke an informed debate about the implications of the findings for the NHS and/or pharmacy and medicines;
- iii) the Trust should not publish anything that is not thought to be robust and reliable; and
- iv) the Trust will aim to share results, identify new and emerging areas for future research and opportunities to share the findings and learning from research more widely.

Since June 2004 the Trust has been working on its events programme. Each event has been primarily designed to disseminate findings from a particularly project and the venue, format and audience selected accordingly. A secondary purpose for all events and press releases (relating to publications and grants as well as events) has been to raise the profile of the Trust generally as:

- a key policy influencing body; and
- a serious grant making organisation.

The Trustees have seen the need to build the reputation of the Trust as a key first stage to securing additional sponsorship and donations from, in particular, the commercial sector in pharmacy – an, as yet, largely untapped source of funding for the Trust's work.

Whilst limited coverage has been secured in the pharmacy press, no concerted attempt has yet been made to generate *proactive* media attention about particular issues or findings emerging from the Trust's work. Similarly, initial stakeholder interest, generated through the events and publications to develop initial contacts into long-term partnerships or funding relationships, has not been built on.

Consideration is therefore being given to the areas of work needed to develop the communications and fundraising activities of the Trust using external experts in the reporting year 05/06.

5. Statement of Trustees' responsibilities

The Trustees of the Charity are required to prepare for each financial year accounts which give a true and fair view of the state of affairs of the Charity and of the incoming resources and application of resources of the Charity for that year. In preparing those financial statements, the trustees are required to:

- select suitable accounting policies and then apply them consistently;
- make judgments and estimates that are reasonable and prudent;
- state whether applicable accounting standards have been followed, subject to any material departures disclosed and explained in the financial statements;
- prepare the financial statements on the going concern basis unless it is inappropriate to presume that this basis applies.

The trustees are responsible for keeping proper accounting records which disclose with reasonable accuracy at any time the financial position of the Charity and to enable them to ensure that the financial statements comply with statutory requirements and with the Trust Deed dated 20 October 1998. They are also responsible for safeguarding the assets of the charity and hence for taking reasonable steps for the prevention and detection of fraud and other irregularities.

Approved by the Trustees on

2006 and signed on their behalf by:

Marshall Davies
Chair, Pharmacy Practice Research Trust

INDEPENDENT AUDITORS' REPORT TO THE TRUSTEES OF THE PHARMACY PRACTICE RESEARCH TRUST

We have audited the financial statements of The Pharmacy Practice Research Trust for the year ended 31 August 2005 which comprise the Statement of Financial Activities, the Balance Sheet, and the related notes. These financial statements have been prepared under the historical cost convention and the accounting policies set out therein.

This report is made solely to the charity's trustees, as a body, in accordance with regulations under the Charities Act 1993. Our audit work has been undertaken so that we might state to the charity's trustees those matters we are required to state to them in an auditor's report and for no other purpose. To the fullest extent permitted by law, we do not accept or assume responsibility to anyone other than the charity and the charity's trustees as a body, for our audit work, for this report, or for the opinions we have formed.

Respective responsibilities of trustees and auditors

The trustees' responsibilities for preparing the Annual Report and the financial statements in accordance with applicable law and United Kingdom Accounting Standards are set out in the Statement of Trustees' Responsibilities. We have been appointed auditors under section 43 of the Charities Act 1993 and report in accordance with regulations made under section 44 of that Act. Our responsibility is to audit the financial statements in accordance with relevant legal and regulatory requirements and United Kingdom Auditing Standards.

We report to you our opinion as to whether the financial statements give a true and fair view and are properly prepared in accordance with the Charities Act 1993. We also report to you if, in our opinion, the Trustees' Report is not consistent with the financial statements, if the charity has not kept proper accounting records or if we have not received all the information and explanations we require for our audit.

We read the other information contained in the Trustees' Report and consider whether it is consistent with the audited financial statements. We consider the implications for our report if we become aware of any apparent misstatements or apparent material inconsistencies with the financial statements.

Basis of audit opinion

We conducted our audit in accordance with United Kingdom Auditing Standards issued by the Auditing Practices Board. An audit includes examination, on a test basis, of evidence relevant to the amounts and disclosures in the financial statements. It also includes an assessment of the significant estimates and judgements made by the Trustees in the preparation of the financial statements,

and of whether the accounting policies are appropriate to the charity's circumstances, consistently applied and adequately disclosed.

We planned and performed our audit so as to obtain all the information and explanations which we considered necessary in order to provide us with sufficient evidence to give reasonable assurance that the financial statements are free from material misstatement, whether caused by fraud or other irregularity or error. In forming our opinion we also evaluated the overall adequacy of the presentation of information in the financial statements.

Opinion

In our opinion the financial statements give a true and fair view of the state of the charity's affairs as at 31 August 2005 and of its incoming resources and application of resources in the year then ended and have been properly prepared in accordance with the Charities Act 1993.

haysmacintyre
Chartered Accountants
Registered Auditors
London WC1V 6AY

Fairfax House
15 Fulwood Place

.....2006

THE PHARMACY PRACTICE RESEARCH TRUST

STATEMENT OF FINANCIAL ASSETS

FOR THE YEAR TO 31 AUGUST 2005

	Notes	Unrestricted funds	Restricted funds	Total 2005	Total 2004 As restated
		£	£	£	£
INCOMING RESOURCES					
Collections , Legacies & Donations	1	307,663	200,000	507,663	461,903
<i>Activities to further the charity's objects:</i>					
Grants for training and research		-	104,362	104,362	98,533
Other Income		3,288	-	3,288	-
Total Incoming resources		310,951	304,362	615,313	560,436
RESOURCES EXPENDED					
<i>Charitable expenditure</i>					
Grants for training and research		-	142,613	142,613	73,754
Research costs		138,319	123,186	261,505	180,469
Support Costs	2	120,001	-	120,001	92,271
Management and Administration		20,745	-	20,745	19,810
Total Resources Expended	3	279,065	265,799	544,864	366,304
Net incoming resources		31,886	38,563	70,449	194,132
Other Recognised Gains and Losses		-	-	-	-
NET MOVEMENT ON FUNDS	4	31,886	38,563	70,449	194,132
Funds Brought Forward as previously stated		-	-	-	12,255
Prior period adjustment	11	-	-	-	20,308
Funds Brought Forward as restated		51,400	175,295	226,695	32,563
Funds Carried Forward		£83,286	£213,858	£297,144	£226,695

THE PHARMACY PRACTICE RESEARCH TRUST

BALANCE SHEET

AS AT 31 AUGUST 2005

		2005		2004	
	Note	£	£	As restated £	As restated £
CURRENT ASSETS					
Debtors	5	-		201,926	
Cash at Bank and in hand		317,998		28,879	
		<u>317,998</u>		<u>230,805</u>	
CREDITORS: Amounts falling due within one year	6	(20,854)		(4,110)	
		<u></u>		<u></u>	
NET CURRENT ASSETS			297,144		226,695
NET ASSETS			<u>£297,144</u>		<u>£226,695</u>
FUNDS					
Unrestricted	7		83,286		51,400
Restricted	8		213,858		175,295
			<u>£297,144</u>		<u>£226,695</u>

Approved by the Trustees on

2006 and signed on their behalf by:

Marshall Davies
 Chair, Pharmacy Practice Research Trust

THE PHARMACY PRACTICE RESEARCH TRUST

ACCOUNTING POLICIES

FOR THE YEAR ENDED 31 AUGUST 2005

The financial statements have been prepared under the historical cost convention. In preparing the financial statements the charity follows best practice as laid down in the Statement of Recommended Practice "Accounting and Reporting by Charities" (SORP 2000) issued in October 2000.

Collection, Legacies and Donations

These are recognised when receivable or when the Trust becomes legally entitled to them. Costs borne by the Royal Pharmaceutical Society on behalf of the Trust are reflected as income, classified as donations and as expenditure in the appropriate categories. As disclosed in note 11 a restatement and prior year adjustment has been made in these accounts.

Expenditure

Cost of generating funds are costs associated with raising funds from all possible sources of income. It mainly consists of fundraising costs in attracting donations, legacies etc.

Grants payable to further charitable objectives are outflows of resources in respect of grants for training and research.

Costs to further charitable objectives are outflows of resources in respect of activities that specifically promote the declared objects of the Trust.

Support costs represent expenditure incurred centrally which supports the Trust's project work. They are an integral part of the cost of carrying out the direct charitable objects of the Trust.

Management and administration costs are costs associated with constitutional and statutory requirements, e.g. the cost of trustee meetings and preparing statutory accounts, and costs incurred in the efficient running of the Trust, e.g. office costs.

Funds

Unrestricted funds comprise those funds which the trustees are free to use in accordance with the charitable objects.

Restricted funds comprise those funds which the trustees must use for training bursaries and research to further charitable objectives.

THE PHARMACY PRACTICE RESEARCH TRUST

NOTES TO THE ACCOUNTS

FOR THE YEAR ENDED 31 AUGUST 2005

1 COLLECTIONS, LEGACIES AND DONATIONS

	Unrestricted Funds	Restricted Funds	Total 2005	Total 2004 Restated
	£	£	£	£
Costs borne by Royal Pharmaceutical Society (R.P.S.) on behalf of the charity	-	-	-	25,572
Donations from R.P.S.	70,000	200,000	270,000	254,000
Gift in kind from R.P.S.	237,663	-	237,663	182,331
	<u>£307,663</u>	<u>£200,000</u>	<u>£507,663</u>	<u>£461,903</u>

The Gift in Kind is a contribution from the RPSGB to the Trust for staff costs and a 40% overhead of these costs to cover infrastructure (IT & Technical support, financial services, catering services, office cleaning, human resources, maintenance and library services). 75% of the salary contribution is allocated to research.

2. SUPPORT COSTS

	Unrestricted Funds	Restricted Funds	Total 2005	Total 2004
	£	£	£	£
Computer Costs	957	-	957	1,330
Books and Publications	-	-	-	875
Conference/Events	7,732	-	7,732	-
Salary Costs (see note 1)	42,440	-	42,440	32,559
Overheads (see note 1)	67,904	-	67,904	52,094
Stationery	169	-	169	4,235
Refreshments	799	-	799	1,178
	<u>£120,001</u>	<u>£-</u>	<u>£120,001</u>	<u>£92,271</u>

3. RESOURCES

	Staff Costs	Other	Depreciation	2005	2004
EXPENDED	£	£	£	£	£
<i>Costs to further charitable objectives</i>					
Training and research grants	-	142,613	-	142,613	73,754
Research costs	127,319	134,186	-	261,505	180,469
Support Costs	42,440	77,561	-	120,001	92,271
Management & administration	-	20,745	-	20,745	19,810
	<u>£169,759</u>	<u>£375,105</u>	<u>£-</u>	<u>£544,864</u>	<u>£366,304</u>

THE PHARMACY PRACTICE RESEARCH TRUST

NOTES TO THE ACCOUNTS (Continued)

FOR THE YEAR ENDED 31 AUGUST 2005

3. RESOURCES EXPENDED (continued)	2005	2004
	£	£
The staff costs are analysed as follows:		
Wages and salaries	131,608	100,424
Social Security	25,900	9,162
Pension Costs	12,251	20,650
	<u>£169,759</u>	<u>£130,236</u>
	2005	2004
	No	No
No employee earned more than £50,000 per annum from the Trust.		
Number of employees	<u>6</u>	<u>4</u>
4. NET MOVEMENT OF FUNDS	2005	2004
	£	£
The net movement of funds is stated after charging:		
Auditors remuneration – audit fee	4,000	3,230
– other services	1,200	880
	<u>5,200</u>	<u>4,110</u>
5. DEBTORS	2005	2004
	£	Restated £
Amounts due from Royal Pharmaceutical Society	<u>£-</u>	<u>£201,926</u>
6. CREDITORS	2005	2004
	£	£
Amounts due to Royal Pharmaceutical Society	15,654	-
Accruals	5,200	4,110
	<u>£20,854</u>	<u>£4,110</u>

THE PHARMACY PRACTICE RESEARCH TRUST

NOTES TO THE ACCOUNTS (Continued)

FOR THE YEAR ENDED 31 AUGUST 2005

7. UNRESTRICTED FUNDS	Balance at 1 September 2004 Restated £	Incoming Resources £	Resources Expended £	Transfers and Investment Gains £	Balance at 31 August 2005 £
General	£51,400	£310,951	£(279,065)	£-	£83,286
	<u>£51,400</u>	<u>£310,951</u>	<u>£(279,065)</u>	<u>£-</u>	<u>£83,286</u>
8. RESTRICTED FUNDS	Balance at 1 September 2004 Restated £	Incoming Resources £	Resources Expended £	Transfers and Investment Gains £	Balance at 31 August 2005 £
LTCT	14,075	-	(9,172)	-	4,903
Galen	9,980	10,000	(19,607)	-	373
Linstead	21,032	40,000	(33,517)	-	27,515
DH Concordance	-	19,362	(19,362)	-	-
Boots	-	25,000	(39,083)	-	(14,083)
Skills for Health	-	10,000	(21,872)	11,872	-
Donations for research	130,208	200,000	(123,186)	(11,872)	195,150
	<u>£175,295</u>	<u>£304,362</u>	<u>£(265,799)</u>	<u>£-</u>	<u>£213,858</u>

Research Training Bursaries (LTCT)

Bursaries made annually to develop individual pharmacists' skills and careers in research.

Galen (RPSGB)

Awards made annually to a total value of £10,000 for pharmacy practice research.

Linstead (LTCT)

Awards made annually to a total value of £40,000 (£30,000 in 2003/04) for research that is of benefit to community pharmacy.

Concordance Fellowship (Department of Health)

To fund research into issues of Concordance.

Supplementary Prescribing (Boots the Chemists)

To fund research into Supplementary Prescribing: Pharmacist and Patient Perspectives

The transfer represents the overspend on the project met by the RSPG donation for research fund.

THE PHARMACY PRACTICE RESEARCH TRUST

NOTES TO THE ACCOUNTS (Continued)

FOR THE YEAR ENDED 31 AUGUST 2005

9. ANALYSIS OF NET ASSETS BETWEEN FUNDS

	Tangible fixed assets £	Net current Assets £	Long Term Liabilities £	Total £
Restricted Funds	-	213,858	-	213,858
Unrestricted Funds	-	83,286	-	83,286
	<u>£-</u>	<u>£297,144</u>	<u>£-</u>	<u>£297,144</u>

10. RELATED PARTY TRANSACTIONS

The trustees did not receive any remuneration during the year, however 7 trustees received reimbursed expenses amounting to £5,001 (2004: £4,179) covering the cost of travel during the year.

During the year the Royal Pharmaceutical Society (R.P.S.) incurred costs amounting to £Nil (2004: £25,572) on behalf of the Trust. The R.P.S. also incurred salary and overhead costs on behalf of the Trust which amounted to £237,663 (2004: £182,331). These amounts are reflected both as income and expenditure in the Trust's accounts.

In 2004 an agreement was signed between the R.P.S. and the Trust whereby the R.P.S. agreed to pay the trust a restricted donation of £200,000 per annum for three years to be spent on research and an unrestricted donation averaging £62,000 per annum to cover the Trust's other costs. The agreements were formalised in 2005 following a review of operations as disclosed in note 11. The Society will still continue to incur salary costs on behalf of the Trust.

11. PRIOR PERIOD ADJUSTMENT AND RESTATEMENT

	Unrestricted Funds	Restricted Funds	Total 2005
Balance brought forward 1 September 2004	12,255		
Prior year adjustment	-	20,038	20,038
Balances brought forward as restated	<u>£12,255</u>	<u>£20,038</u>	<u>£32,563</u>

The prior year adjustment was required as a result of additional grant income received during 2002 for Galen and Linstead restricted funds, which were paid to the Royal Pharmaceutical Society who held this money on trust for the charity. Additionally monies received from the R.P.S. in 2004 had been deferred based on the period covered by the grant. Following a review of the agreements in place with the R.P.S. which were formalised in 2005 these monies amounting to £84,667 have been treated as income upon receipt and the comparatives restated accordingly.