



The Association of Supportive
and Palliative Care Pharmacy

THE ASSOCIATION OF SUPPORTIVE AND PALLIATIVE CARE PHARMACY

CONSTITUTION

1. PURPOSE

The Association of Supportive and Palliative Care Pharmacy (ASPCP) exists to enable pharmacy professionals with a special interest in palliative and/or supportive care to share knowledge and expertise and to identify and promote expert clinical practice, with the aim of improving pharmaceutical care for patients, influencing the national agenda and enhancing our professional development.

2. POSITION OF THE ASSOCIATION

The ASPCP is an independent association but the committee works in collaboration with others as an affiliated partner of the Royal Pharmaceutical Society (RPS). The Association has signed up to the principles of affiliation which are available on the ASPCP website.

3. AIMS

To promote excellence in the pharmaceutical care of patients and their families suffering from the effects of a terminal or life-limiting illness to improve their quality of life.

4. OBJECTIVES

- 4.1. To provide a point of contact for national issues relevant to pharmacy professionals working in supportive and palliative care.
- 4.2. To advise on or make recommendations to strategy and policy including national consultations and guidance.
- 4.3. To provide a network for communicating on issues relevant to supportive and palliative care.
- 4.4. To host a forum for registered pharmacy professionals to share information, advice and exchange views.
- 4.5. To support professional development through the provision of an annual conference and encourage other training events.
- 4.6. To work with the RPS to support a roadmap of training resources including a specialist framework in palliative care for adults within the RPS Faculty membership.
- 4.7. To support pharmacy staff within foundation levels of supportive and palliative care or those embarking upon palliative care as a clinical speciality for the first time.

- 4.8. To promote research in palliative care pharmacy practice and development of the specialism including forging relationships with other palliative pharmacy specialist groups internationally and reporting on these activities.
- 4.9. To support the sharing of practice through a forum and resource hub including audits, research, policies and educational materials.
- 4.10. To act as a point of reference for enquiries relating to supportive and palliative care pharmacy.
- 4.11. To work with other national professional groups within the area of supportive and palliative care.
- 4.12. Maintain a database of information on registered pharmacy professionals with a specialist interest in supportive and palliative care.

5. MEMBERSHIP

- 5.1 Membership of the ASPCP is open to all UK pharmacy professionals registered with the General Pharmaceutical Council (GPhC) or the Pharmaceutical Society of Northern Ireland (PSNI) whether working in the speciality or in a general setting including but not limited to those within hospital, hospice, community, primary care, GP practice, care home or an academic environment.
- 5.2 Applications will also be considered from pharmacy professionals from other countries but must be supported by evidence of professional registration.
- 5.3 All applications for membership can be made electronically via the ASPCP website but must be approved by the ASPCP membership secretary.

6. MANAGEMENT OF THE ASSOCIATION

- 6.1. Management of the ASPCP is undertaken by an Executive Committee consisting of four elected officers and other elected members as deemed necessary and helpful to the work of the Association.
- 6.2. It is desirable to have a pharmacy technician representative on the committee.
- 6.3. The Executive Committee is responsible for the management and operation of the Association.
- 6.4. The Executive Committee includes the following honorary officer positions: Chair, Vice Chair, Membership Secretary and Treasurer.
- 6.5. Committee positions including elected officers will be decided by the Executive Committee at the first committee meeting after the announcement of the elected members.

- 6.6. Other elected committee members support the committee and may lead on one or more areas such as RPS Faculty, conference, industry sponsorship, education and training, website and social media or research and international liaison.
- 6.7. The committee has the power to co-opt other members for specific work streams where additional expertise is required.

7. TERMS OF OFFICE

- 7.1 Elected committee members appointed under 8 will be elected for three-year terms of office, and may be re-elected for further terms of office.

8. ELECTION OF COMMITTEE

- 8.1 Elections for members to serve on the Executive committee are conducted by anonymous electronic ballot and will be completed prior to the AGM before the end of the term of office.
- 8.2 Nominations will be requested from the membership at least two weeks before the date scheduled for the ballot.
- 8.3 Job role profiles will be available for elected Officers and general committee members.
- 8.4 Prospective candidates must be registered members of the Association, work within the UK and be willing to serve for the minimum term if elected. Candidates must represent the views of specialist palliative care.
- 8.5 It is desirable that elected members have the requisite skills for the role which they are undertaking considering the relevant skills and experience of other appointed committee members.
- 8.6 It is desirable that committee members are RPS members and they are prepared to undertake Faculty membership where this is relevant to their role.
- 8.7 The Deputy Chair is the Returning Officer for all elections and is responsible for notifying members of nominations and the result. The ballot will be conducted electronically so that it is anonymous and fair and committee members are unable to see how members voted.

9. EXECUTIVE COMMITTEE

- 9.1 The committee normally meets three times a year including the AGM but may meet more frequently if necessary.
- 9.2 Committee business will be done mostly via email to minimise impact on members' time and work as well as minimise expense.

- 9.3 If necessary, smaller workgroups may meet between committee meetings for specific tasks e.g. website training or Faculty work.
- 9.4 Executive Committee meetings will be arranged so that all committee members can attend but the quorum is four, which must include at least two of the following: Chair, Vice Chair, Treasurer and Membership Secretary.
- 9.5 Where a conflict of interest may arise, members must declare their interest and be prepared to withdraw from the meeting when items of sensitivity are discussed, on the advice of the chair.

10. THE ANNUAL GENERAL MEETING

- 10.1 There must be an Annual General Meeting (AGM) of the members in each year, normally held at the annual conference but may be held at another time if deemed necessary by the executive committee.
- 10.2 The business of the AGM is to:
 - a) Receive a report from the Chair and other committee members if necessary outlining the proceedings of the previous year
 - b) Receive and adopt the financial statements for the preceding fiscal year
 - c) Make decisions on membership fees for the subsequent year
 - d) Elect committee members
 - e) Carry out any other business accepted by the committee

11. ALTERATIONS TO THE CONSTITUTION

- 11.1 Alterations can only be made at an AGM.
- 11.2 Two thirds of those present must approve a change for the alteration to be adopted.
- 11.3 Written notice of changes to the constitution must be sent to all members at least 4 weeks before the AGM.

Liz Miller, ASPCP Treasurer

Presented and agreed to members at the 10th AGM on 16th November 2017.