



Royal Pharmaceutical Society of Great Britain

Helping pharmacists achieve excellence

Mr. Roy Drepaul
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FITNESS TO PRACTISE AND LEGAL
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Dear Mr. Drepaul,

Re: MLX 346: Proposals for amendments to the range of medicines which can be sold, supplied or administered by registered midwives

I write on behalf of the Royal Pharmaceutical Society for Great Britain (RPSGB) in response to the above consultation.

The RPSGB is the professional and regulatory body for pharmacists in England, Scotland and Wales. It also regulates pharmacy technicians on a voluntary basis, which is expected to become statutory under new legislation soon.

The primary objectives of the RPSGB are to lead, regulate, develop and represent the profession of pharmacy.

The RPSGB leads and supports the development of the profession within the context of the public benefit. This includes the advancement of science, practice, education and knowledge in pharmacy. In addition, it promotes the profession's policies and views to a range of external stakeholders in a number of different forums.

The RPSGB has responsibility for a wide range of functions that combine to assure competence and fitness to practise. These include controlled entry into the profession, education, registration, setting and enforcing professional standards, promoting good practice, providing support for improvement, dealing with poor performance, dealing with misconduct and removal from the register.

The consultation letter sought views on the following proposals:

Removals from the list of POMs which can be sold, supplied or administered by midwives

The RPSGB would support the deletion of the listed medicines where they have limited clinical value and are therefore rarely used.

Additions to the POM medicines which can be sold or supplied by midwives

Midwives are highly trained healthcare professionals and therefore the RPSGB would have no objections to the additions to the list as proposed. It would appear that these additions may allow more timely access to necessary medicines for women and newborn babies. This would therefore improve the safety and wellbeing of such patients.

Additions to the list of POM medicines for parenteral administration by midwives in the course of their professional practice

The RPSGB would have no objections to the additions to the list as proposed. It would appear that these additions may allow more timely access to important medicines for women and newborn babies and would therefore improve the safety and wellbeing of such patients.

The RPSGB agrees that these proposals would allow equal access to medicines for women wishing to give birth in a home setting, where the medicines are used in the course of midwives' professional practice.

Yours sincerely,

Daniella Murphy
Acting Head of Advisory Service
Fitness to Practise and Legal Affairs Directorate