Papers Presented to Local Branches

THE NEW HOUSE OF DELEGATES OF THE A. PH. A.*

JOSEPH W. ENGLAND.

Probably one of the most important forward steps ever taken by the American Pharmaceutical Association was the formation of the House of Delegates at the recent Denver meeting. It was created by resolution and not by by-law. Its functions are distinctly limited; it may become a very important factor in the work of the Association and be given larger powers, or it may fail to meet the needs of the Association and be abolished. Although of the same name as that of the governing body of the American Medical Association, its powers and duties are radically different.

Originally, the American Pharmaceutical Association was a delegate-body, delegates being sent by colleges of pharmacy and pharmaceutical organizations to the annual meeting, the thought being that by making the Association an association of delegates the cities would be encouraged to form local organizations; but later it was feared that the Association might become subject to the control of local organizations, and it was thought best to be independent of all local bodies, so individual membership was made dominant. Strange to say, however, while the delegate system as the controlling power of the Association was abolished the system itself was continued, but with the delegates having no duties to perform. Hence, the attendance of delegates, for many years, has been perfunctory. It is true that many of the delegates exerted, as individual members, an important influence in the councils of the Association, but it was felt that this influence could be more widely extended and made potential for the good of the Association, if the delegates were given specific duties.

The membership of the House of Delegates will consist of three regularly elected or appointed delegates from Local Branches of the American Pharmaceutical Association, State and Local Societies, Colleges and Schools of Pharmacy and delegates from the National Association of Retail Druggists, National Wholesale Druggists Association, American Medical Association, National Association of Boards of Pharmacy, Women's Organization of the National Association of Retail Druggists, National Association of Manufacturers of Medicinal Products, American Chemical Society, Association of National and State Food and Dairy Departments, Association of Official Agricultural Chemists, and from the departments of the Army, Navy and Public Health and Marine Hospital Service, the American Association of Drug Clerks, the credentials of whom shall all be approved by the Council; together with five members of the Council, appointed

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by the Chairman of the Council. The President, President-elect, Treasurer, General Secretary and the Chairman and Secretary of the Council shall be members ex-officio.

With such a widespread membership in the House of Delegates there is danger that the body may become unwieldy, and also, that outside interests may dominate the interests of the Association. The first danger can be readily met, if it should occur, by reducing the number of delegate-representation from three to two or one; and the second, by the fact that a majority of the delegates will probably be in the future, as they have been in the past, members of the Association.

The elected or appointed delegates hold office for one year, or until the credentials of their successors shall have been approved by the Council.

Each delegate is entitled to one vote. No delegate shall act as the proxy of another delegate who has been scated nor as delegate for more than one Association, organization or institution. Any member of the Association may attend any session of the House of Delegates and has the privilege of the floor.

The first session of the House of Delegates at each annual meeting will be called to order by the Chairman or one of the Vice-Chairmen, or the Secretary of the preceding House; or, in the absence of all of these, by the Secretary of the Council

The House of Delegates will exercise the following functions:

1. To receive and consider the reports of delegates from the bodies which they represent in the House of Delegates.

2. To consider and report upon such resolutions, and upon such other subjects as may be referred to the House of Delegates by the Council, by the Sections or by the Association in general session.

3. To make a final report of the business transacted to the final session of the outgoing Council at each annual meeting.

4. To adopt all rules and regulations necessary to the proper conduct of its business and not inconsistent with the Constitution and By-laws of the Association and the Council.

It should be noted that the House of Delegates can exercise only such functions as have been specified, or may be hereafter specified by the Council. It can either initiate resolutions, or it can consider and redraft those referred to it by the Association, Sections or Council. It is in effect, a clearing house in which resolutions can be referred and proposals moulded into shape for consideration by the Council —which still remains the executive body of the Association—and which, in turn, reports to the general assembly. In this way, questions can be fully and thoroughly discussed before the House of Delegates, both by delegates and members, and the business of the Association, Sections and Council expedited.

The House of Delegates will be, also, the connecting link between the colleges of pharmacy and pharmaceutical organizations and the Association whereby cooperation and coordination of work can be secured. When delegates are appointed to attend meetings of a delegate body they naturally bring with them the wishes

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of the bodies they represent, and when they return they carry back the results of their deliberation.

In this way there can be closer connection in work and reciprocal action, and the Association can better represent the interests of the whole country, and be, in effect, what it should be, a more truly representative national organization.

As one of the local branches, the Philadelphia Branch of the American Pharmaceutical Association, is entitled to and should send three delegates to the next annual meeting at Nashville in 1913, and the writer would suggest that the bylaws of the Branch be amended to provide for the selection of such delegates.

THE PHARMACIST'S DUTY TO HIS PROFESSION.*

A. G. ERKEL.

As you all know, the State Association claims a sort of parental relationship to the college, since it was the chief agency that induced the Regents to add the college to the university. The association was largely responsible for the first appropriation of \$5000 for the college in 1891. This committee therefore, is the connecting link between the college and the association. Its chief function, I take it, is to point out to the association and to the pharmacists of the Northwest what the relationship between the college and the association should be. In taking such prominent part in the establishment of the college, the association must have had in mind the great value which an educational institution of high rank would be to the profession. The inevitable inference is that the association would utilize such an institution to the utmost. The profession and the association, except a comparatively few of the more progressive individual pharmacists, have been more or less indifferent to the advantages which the college affords the calling. The standard of pharmacy, like that of any other calling, is determined largely by the standards of the individuals composing it. It can be said without fear of successful contradiction that pharmacy in Minnesota has not developed as rapidly as it could have done if it had used to the fullest the advantages and opportunities offered by the college. The number of graduates and the number of students in attendance are not at all commensurate with the numbers practicing pharmacy. This is due to a short-sightedness on part of the pharmacists who do not insist upon a sufficiently adequate training for their apprentices and clerks. They do not sufficiently appreciate the fact that their calling is a trust in their hands upon which they as trustees are bound to administer according to the duties which this trust imposes. Most pharmacists are delinquent in that they do not recognize any duties toward the profession at large. They do not look upon the profession as something concrete made up and determined by the individual members and so lose sight of their responsibilities in this respect. Every pharmacist is doing all he possibly can to improve his own conditions, but what is he doing to improve

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