

Pharmacy Business Ownership Bill 2023

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Committee Secretary
Economics and Governance Committee
Parliament House
George Street
Brisbane Qld 4000

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Via: [<EGC@parliament.qld.gov.au>](mailto:EGC@parliament.qld.gov.au)

Dear Sir/Madam,

RE: Committee inquiry into the Pharmacy Business Ownership Bill 2023

I have been the owner of the Moura Pharmacy since 1999, and I have many concerns over the Pharmacy Business Ownership Bill 2023.

Issues #1

The definition of core pharmacy services (Clause 8(3))

If only my “pharmacy” was “the dispensing and compounding of medicines” as the current Bill wording seems to define it as.... I could do away with all the training and accreditations surrounding vaccination services (State and Federal schemes): all the standards associated with medication blister packing and delivery to remote and isolated communities such as Moura and Banana and Baralaba to keep the older folks in their homes longer: presumably the provision of freely available advice and monitoring of health conditions such as blood pressure, asthma, would also no longer require such a focus?

- The current definition in the Bill is too narrow and is limited to dispensing and compounding of medicines only.
- THIS IS NOT CLOSE TO WHAT SERVICES COMMUNITY PHARMACIES PROVIDE (not by a country mile as we like to say out in the country!)
- The supply of a medicine is not simply limited to the PBS dispensing of it: there is the provision of advice, and possibly the packing of that medication into DAA.
- By having a narrow definition of pharmacy services, it limits how the Bill is able to deal with the concept of external control of how pharmacy services are delivered to the public (clause 22). If control of pharmacy services is linked to the definition of *core pharmacy services* then there is a risk that a number of relevant pharmacy services will be left outside the regulatory control of the Bill.
- Where the intent of the Bill is to describe who may own a pharmacy business, a robust definition of what constitutes a pharmacy business (through definition of the services that business provides) must be offered as part of the Bill.

Proposed change:

- To adopt a broader definition of ‘core pharmacy services’ as ‘pharmacy services’:

pharmacy services means –

(a) health services (including dispensing, supply, prescribing, selling, administering, repackaging, compounding, possessing, disposing of medicines and the provision of clinical service or advice (either at or from a licensed premises or through digital platforms)) provided in the course of practice by a pharmacist or a person who holds themselves out, or is held out by another, as a pharmacist;

Issues #2:

The definition of a supermarket (Clause 11(3))

In order to make effective and useful legislation to control pharmacies and supermarkets etc, it is essential to have adequate definitions of what a supermarket is: just like “pharmacy services” needed to be adequately and properly defined above.

- The definition of a supermarket is not broad enough to capture the likely increase in online supermarket businesses in the future.
- By inclusion of the word ‘premises’ in the definition, it ties the concept of a supermarket to a bricks and mortar place, and it is not able to capture the growing online marketplace.
- To ensure that the policy objective of the Bill to ‘prohibit the council from issuing a licence if the pharmacy business is located in a supermarket’ is met, the Bill must have application to pharmacy businesses and supermarkets whether they are online or physical locations.

Proposed change:

- To adopt the following definition of a supermarket:

supermarket means a premises or online store used primarily for selling a range of food, beverages, groceries and other domestic goods.

Issues: #3: What is a material interest in a pharmacy business (Clause 13)

If **ANY** party has an ability to affect the operation of a pharmacy business via some controlling influence over the pharmacist-owner (either financial or legal) then that party really has a material interest in that pharmacy, and that should be counted as such.

If this loophole of indirect-ownership is not closed, it kind of makes the whole intent of this Pharmacy Ownership Bill pointless.

- The definition of a material interest is inadequate in capturing the interest that may be held in a pharmacy business.
- The definition is inconsistent with other jurisdictions as it does not use the terms 'legal' and 'beneficial'.
- A failure to appropriately define a material interest means that interests that are not expressed in the current definition may not be able to be deemed unlawful interests.

Proposed change:

- To adopt an amendment to the definition of 'material interest' to include the words 'legal' and 'beneficial':

Clause **13(1)(c)** should say:

(c) any other interest, **legal** or **beneficial** in the business, other than an interest of an owner of the business.

(2) to remove any doubt, an interest includes, but is not limited to, having a right to receive consideration directly or indirectly that varies according to the profits or takings of the pharmacy business.

The existing clause 13(2) would be renumbered 13(3).

Issues# 4

Matters relating to the Queensland Pharmacy Business Ownership Council (the council) (Clauses 147, 150, 153, 207)

- One of the main purposes of the Bill is to maintain public confidence in the pharmacy profession. To ensure this can be achieved, it is not acceptable that there is no mandatory requirement that the register of licensed pharmacy businesses is listed on the council's website. This will ensure there is transparency for the public so that they know who the owner of the pharmacy is.
- The council is funded by the industry to perform a critical function in registering and licensing pharmacy businesses. The function of the council must not be diluted by becoming involved in the functions of any other Act.
- The composition of the council membership as it is currently stated is unacceptable. The council is an industry body that has the potential to be weighted inappropriately, where industry experts may be significantly outnumbered. There must be a majority of pharmacy business owner members to ensure that the council is able to function as intended.
- There is currently no limit to the number of terms that a member of the council is permitted to serve. To ensure a contemporary and representative council, there should be a limit to

the number of consecutive terms, and terms in total, that a member is permitted to serve. The term of membership is one year longer than councils in other states and territories, so a maximum number of terms is needed.

Proposed changes:

- Clause 207 (5) must be amended:
*The council **must** publish the information contained in the register on the council's website.*
- Clause 147 (1)(g) must be amended:
any other function given to the council under this Act.
- Clause 150 (4) must be amended:
the council must consist of –
(a) a majority of persons mentioned in subsections (3)(a)(i) and (3)(a)(ii) with the actual number dependent on the size of the council
- Clause 153 (2) should be amended to include a limit to the number of times a council member can be reappointed:
(2) a council member may be reappointed a maximum of two terms

Yours sincerely

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