

## Pharmacy Business Ownership Bill 2023

**Submission No:** 40  
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Committee Secretary  
Economics and Governance Committee  
Parliament House  
George Street  
Brisbane Qld 4000

17<sup>th</sup> January 2024

Dear Sir/Madam,

**RE: Committee inquiry into the Pharmacy Business Ownership Bill 2023**

I Have been a pharmacy owner in Queensland for 10 years and managing the same pharmacy prior to that for another 10 years. In that time, I have witnessed many changes which have impacted the industry. This is why I hold the following concerns about the Queensland Pharmacy Business Ownership Bill 2023.

Whilst the bill has addressed many key points adequately there are still a number of points where improvements and clarity need to be made. The first point I would like to bring to your attention is around the definition of core pharmacy services.

1. Core Pharmacy Services

In its current form the Bill does not adequately define what a core pharmacy service is. It limits core pharmacy services to dispensing and compounding of medications. This is not an accurate reflection of the services that a pharmacist provides and means that, for example, where the dispensing of a medicine is considered a pharmacy service, the provision of advice about that medicine, is not. This would mean that 50% of my time each day is a waste, because on average half of my day is taken up with counselling my customers on the safe and effective use of medications whether they be taking it for the first time or if they take it regularly but due to confusion they need ongoing reassurance and guidance around safe and effective use to mitigate and future medication misadventures.

My concern is that by having a narrow definition of pharmacy services, it limits how the Bill can 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. So, services such as immunisations, medication checks, blood pressure monitoring, diabetes checks, packing of medications, etc. may not be offered in the way they are today.

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.

***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;

It is my belief that a broader definition of core pharmacy services needs to be adopted not only for the sake of this Bill but to provide all pharmacists with the respect they deserve for providing the level

of the healthcare they do each and every day, and not to undermine or degrade a profession which still stands and one of the most respected amongst the public.

### 1. Definition of Supermarkets

Another area of concern is the definition of a supermarket. With the ever-evolving landscape of the retail sector I feel that the definition of a supermarket should not be restricted to a premises which neglects the growing online marketplace.

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

So, 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.

### 2. Interest in Pharmacy Business

Another area of concern is the definition around material interest in a pharmacy business. The current definition is inadequate in defining the interest that may be held in a pharmacy business. It is inconsistent with other jurisdictions and 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.

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).*

The addition of the above terminology would provide further integrity to the community pharmacy model and how we deliver healthcare to our patients.

### 3. Pharmacy Business Ownership Council

One of the main purposes of the Bill is to maintain public confidence in the pharmacy profession, with that in mind it seems unacceptable that there is no mandatory requirement that a register of licenced pharmacy businesses be listed on the council's website. If we want complete transparency for the public, I believe this needs to be rectified.

The council should consist of industry experts as well as pharmacy business owners, weighting it appropriately with an adequate number of business owners to ensure that the council can function as it was intended and not be diluted. With that in mind, 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:**

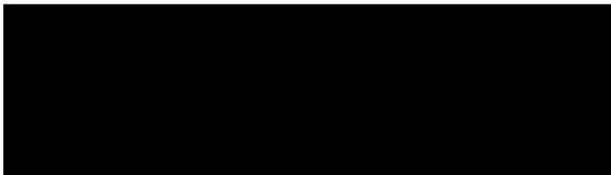
- Clause 207 (5) must be amended:  
*The council must publish the information contained in the register on the council's website.*
- Clause 147 (1)(g) must be amended:  
*any other function given to the council under this Act.*
- Clause 150 (4) must be amended:  
*the council must consist of –*  
*(a) 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*

With the above in place the pharmacy business ownership council will have the desired impact on providing the public with the ongoing confidence in how Queensland pharmacies are owned and operated.

I hope the information I have highlighted above is taken into consideration by the Economics and Governance Committee when reviewing the proposed changes to the Pharmacy Ownership Bill. As it stands the Bill is flawed and needs to consider the people and communities it will affect the most. Small business owners like me have invested time and money into providing healthcare services for our communities and the implementation of the current Bill will undermine all we have sacrificed over the years.

Queensland's community pharmacies were the sole destination that countless numbers of patients could come to receive healthcare advice and services at a time when the healthcare system was overwhelmed during the pandemic. I ask you to remember this and support those who supported our state during one of the worst health crisis I have ever witnessed.

Yours Sincerely,



Christopher McMullen

Brassall Pharmacy