

Pharmacy Business Ownership Bill 2023

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Committee Secretary
Economics and Governance Committee
Parliament House
George Street
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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

As a community pharmacy owner in Queensland, I hold the following concerns about the Pharmacy Business Ownership Bill 2023:

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

The current draft of the Bill presents a constrained and antiquated perspective of "pharmacy service." In light of evolving practices in contemporary pharmacy, it is imperative to expand and update this definition to accurately encapsulate the full spectrum of services provided by pharmacists today.

The existing definition is overly restrictive, focusing solely on the dispensing and compounding of medicines. This limited view fails to acknowledge the comprehensive role of pharmacists, which extends beyond dispensing to include critical services such as patient counselling and medication management advice. Consequently, the Bill inadvertently excludes these vital aspects of pharmacy practice from being recognized as part of the core pharmacy services.

The narrow scope of the current definition significantly impacts the effectiveness of Clause 22, concerning the external regulation of pharmacy service delivery. If the regulatory framework is predicated on an outdated definition, it risks omitting several pertinent pharmacy services from its regulatory purview. This could lead to a lack of comprehensive oversight and control over the diverse functions performed in a pharmacy setting.

Furthermore, for the Bill's objective of delineating the ownership criteria for pharmacy businesses, it is crucial to provide a robust and inclusive definition of what constitutes a pharmacy business. This definition should reflect the diverse range of services offered by such businesses, thereby ensuring a comprehensive regulatory approach.

I propose a adoption of a broader and more contemporary 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

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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;

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

The current definition of "supermarket" in the Bill is limited in its scope and does not sufficiently account for the evolving landscape of retail, particularly the rise of online supermarket platforms. The present definition fails to encompass the anticipated growth of online supermarket businesses. As the retail sector continues to expand digitally, the definition should be broadened to include these emerging business models.

The use of the term 'premises' in the current definition restricts the concept of a supermarket to a physical, brick-and-mortar location. This narrow interpretation does not reflect the growing trend of online marketplaces, which are increasingly becoming a significant part of the retail ecosystem.

In order to align with the Bill's policy objective of prohibiting the issuance of a license to a pharmacy business located within a supermarket, it is crucial that the definition of a supermarket is inclusive of both online and physical entities. This is essential to ensure comprehensive application and enforcement of the Bill's provisions, regardless of the operational format of the supermarket or pharmacy business. This revision protects patients by ensuring consistent regulatory standards across both physical and online retail spaces.

In light of these considerations, it is recommended that the definition of a supermarket in Clause 11(3) be revised to more accurately reflect the current and future landscape of retail operations, encompassing both physical stores and online platforms. This amendment will ensure that the Bill remains relevant and effective in a rapidly evolving commercial environment. I propose the following change to the definition of "supermarket".

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

What is a material interest in a pharmacy business (Clause 13)?

The definition of "material interest" in the context of a pharmacy business, as currently articulated in Clause 13 of the Bill, presents certain inadequacies and inconsistencies that warrant reconsideration. The existing definition of "material interest" is insufficient in comprehensively capturing the various forms of interests that can be held in a pharmacy business. This limitation could potentially overlook significant forms of involvement or influence that are relevant in the context of pharmacy operations.

There is a notable inconsistency with definitions used in other jurisdictions, particularly in the omission of the terms 'legal' and 'beneficial'. These terms are critical in distinguishing different types of interests, and their absence could lead to ambiguity and misinterpretation in the application of the Bill.

The lack of a thorough and clear definition of "material interest" poses a risk of certain interests, not

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explicitly mentioned in the current definition, being overlooked, and not regulated as unlawful. This gap could inadvertently allow for interests that counteract the Bill's objectives to exist without appropriate legal scrutiny or control.

Given these concerns, it is proposed that the definition of "material interest" in Clause 13 be revised to encompass a broader range of interests, incorporating the concepts of 'legal' and 'beneficial' interest. This will ensure greater alignment with other jurisdictions and provide a more precise and comprehensive framework for identifying and regulating interests in pharmacy businesses.

I propose the following change to Clause 13(1)(c)

(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).

This comprehensive approach ensures that all relevant interests are regulated, safeguarding our community against unlawful or unethical influences that could compromise patient care.

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

The Bill's primary goal of sustaining public confidence in the pharmacy profession necessitates several critical amendments to ensure its effectiveness and transparency:

Mandatory Public Register on Council's Website: The absence of a compulsory requirement to list the register of licensed pharmacy businesses on the council's website is a significant oversight. To uphold transparency and enable public awareness of pharmacy ownership, it is essential to mandate the publication of this register online.

Mandatory listing of licensed pharmacy businesses on the council's website is a crucial step towards transparency. This allows patients to make informed choices about where they receive their pharmacy services, fostering a sense of trust and security in the system. Knowing who owns and operates these pharmacies helps in building a transparent relationship between pharmacists and the public, which is essential for patient safety and confidence.

Council's Focus on Core Functions: The council, funded by the industry, plays a pivotal role in registering and licensing pharmacy businesses. It is imperative that the council's function remains focused and undiluted by the responsibilities of any other Act. This focus is crucial to maintain the integrity and effectiveness of the council's primary role.

Keeping the council's focus narrow and specific to its core functions of registering and licensing pharmacy businesses is vital. This ensures that the council is not overextended or distracted by

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responsibilities outside its expertise, thereby enhancing its efficiency and effectiveness in safeguarding patient interests. A focused council can better oversee the quality and standards of pharmacy practices, directly impacting patient safety.

Council Membership Composition: The current composition of the council membership is not conducive to balanced representation. Given that the council is an industry body, it is vital to ensure a majority of pharmacy business owner members. This composition is necessary to prevent an imbalance where industry experts might be significantly outnumbered, ensuring the council can function as intended.

The composition of the council is another critical aspect. Ensuring that it has a majority of pharmacy business owner members guarantees that the council's decisions and policies are informed by hands-on industry experience. This leads to more pragmatic and patient-centric regulations, directly influencing the quality of care received by patients. Balanced representation prevents any single group from dominating the decision-making process, ensuring that all policies are well-rounded and consider various perspectives.

Limitation on Council Members' Terms: Presently, there is no restriction on the number of terms a council member can serve. To foster a contemporary and representative council, it is recommended to impose limits on the number of consecutive terms and total terms a member can serve. Additionally, considering that the term of membership exceeds that of councils in other states and territories, establishing a maximum number of terms is even more crucial.

Setting term limits for council members encourages the influx of fresh ideas and perspectives, vital for a progressive and adaptive approach to pharmacy governance. This dynamism is essential in a rapidly evolving healthcare landscape, where staying abreast of new developments and challenges is key to patient protection. A council that regularly renews its membership is more likely to be in tune with current trends and patient needs, thereby enhancing the overall quality of pharmacy care.

These recommended amendments aim to enhance the Bill's efficacy in maintaining public trust in the pharmacy profession, ensuring focused governance by the council, and promoting balanced and dynamic leadership within the council.

As such, I propose the following 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

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These proposed amendments to the Bill are of paramount importance in ensuring the safety and well-being of patients, as well as in bolstering the public's trust in the pharmacy profession. These amendments go beyond mere administrative tweaks; they are fundamental to the integrity and efficacy of pharmacy practice.

These amendments are designed to create a robust, transparent, and patient-focused regulatory framework for the pharmacy profession. By prioritizing these changes, we ensure that patient care and safety remain at the heart of pharmacy practices, thereby maintaining the highest standards in healthcare provision, transparency, accountability and reinforcing public trust in our vital sector.

Yours Sincerely,

Amy Ford



Amy Ford
Pharmacist | Director



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