

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

Dear Sir/Madam,

RE: Committee inquiry into the Pharmacy Business Ownership Bill 2023

I am the proprietor of Broadwater Pharmacy in Biggera Waters, Gold Coast (Yugambeh Language Country), and have been since 2010. It was actually the pharmacy I and my family used growing up, so my ties to the pharmacy, and the community it serves, goes back much longer – 4 decades now, in fact.

In that time, many things have changed about Queensland and the Gold Coast. One of the few things that has remained consistent in that time, however, is that there is always a local pharmacy nearby owned by a registered and licenced local pharmacist with a direct stake in the community and its health outcomes. In a time when other health services have become corporatised and started to operate in the interests of their shareholders rather than their patients, it has been a welcome, rare and pragmatic example where patient and consumer benefit has won out over an ideological theory.

While nationalising the supply of pharmaceuticals and services provided by pharmacists through direct government ownership of pharmacies would probably be the best outcome, the present system has been a good demonstration of the role of the private sector in achieving public health aims and outcomes.

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

Issues:

- The current version of the Bill does not adequately define what a pharmacy service is in the modern context. The definition is too narrow and is limited to dispensing and compounding of medicines only. 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.
- 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. Examples include the status of the employer of Aged-Care onsite Pharmacists (<https://www.health.gov.au/our-work/aged-care-on-site-pharmacist>)
- 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;

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

Issues:

- The definition of a supermarket is not broad enough to capture the likely increase in online supermarket businesses in the future, especially given the scope, size, and breadth of the businesses that own them.
- By including 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. This risks issues relating to patient health information being used in the marketing of non-health products.
- To ensure that the policy aim 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, portal, or app, 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)

Issues:

- 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).

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

Issues:

- 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/are, and be assured that the

pharmacy will act in their interest, and not of a shareholder. As much information should be made public as possible, but must also be done in a way that

- The council is funded by the industry to perform a critical function in registering and licensing pharmacy businesses. In this regard, it would be inappropriate for the council to become involved in the functions of any other Act that is not directly related to this Act.
- The composition of the council membership as it is currently stated has room for improvement. 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 that also balances continuity and institutional knowledge, 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 also 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 Three terms in total, or two consecutive terms

Yours sincerely

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