



05 July 2018

Committee Secretary  
HCDSDFVPC  
Parliament House  
George Street  
Brisbane QLD 4000

Dear Mr Hansen

**RE: Inquiry into the establishment of a pharmacy council and transfer of pharmacy ownership in Queensland**

Queensland Positive People (QPP) is the peak peer-based, not-for-profit organisation that offers support primarily to the diverse array of people living with HIV (PLHIV) in this state. We are funded by Queensland Health to provide a range of services including HIV rapid testing; peer navigation, peer support & self-help activities; referrals; advocacy against stigma and discrimination; and access to treatments & health promotion information for PLHIV, and those affected by HIV, throughout Queensland.

We have a long history of working with community pharmacies in Queensland on a range of programs, including sharps disposal services in pharmacies and education programs for pharmacists.

We are writing to the inquiry because we are concerned about some elements of the terms of reference, specifically those which relate to the deregulation of pharmacy ownership in Queensland.

QPP believes the current, regulated model has clearly demonstrated that community-based pharmacies provide the model of service and care that PLHIV need. PLHIV, who are often on a range of medications, need support, advice and care from their pharmacists. We are concerned that a corporatised model, which puts profits first, would limit pharmacists' ability to provide the appropriate model of specialised and complex care and advice PLHIV often require.

HIV-related stigma and discrimination refers to prejudice, negative attitudes and abuse directed at PLHIV. Unfortunately, HIV remains highly stigmatised in society for those living with HIV. Most PLHIV are very concerned about the maintenance of their confidentiality, and some live in daily fear of unauthorised disclosure of their HIV status. Under the current model, PLHIV have been able to choose pharmacies which are independently owned, and build trusting relationships with the pharmacists at those pharmacies over many years.

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Through these relationships, PLHIV have become assured that their confidentiality is being strictly upheld. We are very concerned that, should pharmacists simply become employees of large corporate entities, this consistency of service and the strict maintenance of confidentiality may be compromised for PLHIV. This would create significant concerns and declining confidence for PLHIV and may put their necessary treatment plans at risk – particularly in rural and regional areas – and may even discourage some from accessing treatments at all.

QPP is also concerned about the threat that a 'big business' takeover of pharmacies may pose to the access to HIV medicines in pharmacies. HIV medications are expensive to stock and we are concerned that pharmacies owned by corporate entities, who are primarily motivated by profit, would be reticent to stock these medications. Again, this is particularly the case in rural and regional areas, where lower profit margins may encourage corporates to avoid stocking expensive, but life-saving, medications.

The population of PLHIV in Queensland is also ageing. This adds the additional complexities associated with age-related comorbidities and illness to the care that PLHIV require. These complexities only amplify the issues already detailed around consistency of service, quality of care, access to medicines and the strict maintenance of confidentiality.

Finally, we are concerned that big business-run pharmacies may be less inclined to participate in health awareness campaigns around HIV, due to the restrictions associated with their profit models. We currently benefit from a strong relationship and professional partnership with the pharmacy sector in the distribution of educational materials and the implementation of awareness campaigns. Given that these are not profitable activities for pharmacies, we are concerned that profit-driven businesses may simply opt out of participating in awareness-raising campaigns.

The Queensland Health *HIV Action Plan* lists pharmacies as key settings for testing and treatment of HIV. Community pharmacies, in our experience, are currently effective settings for HIV awareness and prevention, and are also invaluable health service providers and partners for PLHIV. Accordingly, QPP would be obliged to oppose any proposed deregulation of the sector, which may put the current model of community pharmacy – and therefore the well-being of Queensland PLHIV – at serious and unnecessary risk.

Yours sincerely

**Simon O'Connor**  
Executive Officer

