Health, Community and Disability Services, Domestic and Family Violence Committee Parliament House George Street Brisbane QLD 4000

July 69, 2018

RE: Inquiry into establishing a pharmacy council and pharmacy ownership in Queensland

Dear Sir/Madam,

We are partners in five community pharmacies in the Central Queensland towns of Gracemere and Yeppoon. We employ in excess of 85 staff including nearly 20 pharmacists. Excluding the CQHHS, we are the largest employer of pharmacy staff in the Central Queensland area. We offer many services from within our community pharmacies such as but not limited to: home medication reviews, medication reviews and quality use of medication activities in nursing homes, blood pressure, blood glucose and blood cholesterol recording, clinics for sleep apnoea, weight loss, hearing loss and bone density, free home deliveries, webster packed medications, health promotion campaigns and community group education, opioid substitution program and pharmacist immunisation.

We have read with great interest about your inquiry into the establishment of a pharmacy council and pharmacy ownership in Queensland and would like to highlight the following points which are important to us.

- We support the establishment of a pharmacy council to oversee issues including transfer of pharmacy ownership and industry wide adherence to the Queensland Health, Drugs and Poisons Regulations 1996. We see that establishment of such a Council will only make our industry stronger;
- We have concerns that some transfers of ownership which have occurred in Queensland in the past 24 months are not in the spirit of the Pharmacy Business Ownership Act 2003 and welcome your review of these transfers. Our concerns in this area further highlight the important role a pharmacy council could play in Queensland;
- We unequivocally support pharmacist-only ownership of community pharmacies for numerous reasons as listed below:
  - Pharmacist proprietors are clinicians at heart. Clinicians fundamentally make decisions which are in the best interests of their patients not in the best interest of management KPIs, net profitability or shareholders which would be the focus of non-pharmacist proprietors;
  - Pharmacist proprietors have professional autonomy and their actions can be held accountable to the Pharmacy Board of Australia. Breaches and unprofessional conduct can result in deregistration which would lead to losing their entire business. Such actions could not be replicated with non-AHPRA registered proprietors;
  - Most pharmacist proprietors have borrowed significant sums of money to invest in their pharmacies. Pharmacies are typically multi-million dollar investments and deregistration of our industry could have catastrophic outcomes on the livelihood of them and their families, their ability to repay debt and to remain solvent;
  - Bruce Elliot has worked as a pharmacist in a corporate owned general practice. His
    observations were that whilst clinical decisions relating to patients remained in the hands of

the General Practitioners, other important aspects of the business eg how many patients were to be seen per hour, which clinical programs the practice would be involved in, how home visits and after hours appointments could or couldn't be accommodated and employment levels of other clinical support staff (practice nurses) were all dictated by management not the treating GPs;

- Competition within the industry is already extremely strong even with our regulated conditions. Never before has our industry seen so many pharmacies enter receivership. In the last 18 months, two large community pharmacies went into receivership in Rockhampton alone. This has resulted from several factors including high rents and rising costs coupled with declining income due to federal government reforms to the pharmaceutical benefits scheme. However, the largest contributor to bankruptcy within our sector is competition from within. The advent of big box discounting pharmacies has driven down prices of medications and front of shop items and has placed extraordinary financial pressure on all pharmacies. Lower prices (often cheaper than in supermarkets) combined with the already efficient geographical spread of community pharmacies means consumers already have easy access to competitive conditions without the need for changes to ownership or location rules;
- Whilst from the exterior, community pharmacies may appear like flash corporate entitles, especially
  with the introduction of big box discounters, the vast majority of community pharmacies are small
  businesses run by 'Mum and Dad operators' and should be viewed no differently than a local
  takeaway store or green grocer. Banner groups, marketing groups and buying groups have afforded
  these 'Mum and Dad operators' enhanced marketing and trading terms but in no way can influence
  how their pharmacy can and should be run. They are fundamentally just another small business
  within your electorates;
- We support pharmacists being remunerated for working at the very top of their scope of practice
  which currently is not the case. In recent years, we have seen a shift towards this with new
  programs such as pharmacist immunisation but we believe we could do much more (even in our
  existing scope) like managing minor ailments eg uncomplicated urinary tract infections, providing
  extensions/repeats to already prescribed medications within agreed frameworks and supplying
  certain medications eg. erectile dysfunction and contraceptive medicines over the counter as seen in
  many other countries;
- We believe that there is a larger role for pharmacists to further support general practitioners in the
  treatment of minor ailments and conditions. This would free up the GPs time so that they too were
  working at the top of their scope of practice, focusing on more complex patients and those who are
  acutely or critically ill. Hence they would be seeing the patients who truly need to be seen not
  patients who simply need a repeat prescription or advice on basic complaints such as constipation;
- We believe that there is a larger role for pharmacists to play in preventing unnecessary admissions to the emergency departments of our state hospitals. Many category 5 conditions seen in our EDs could be capably dealt with (and within our scope of practice) in a community pharmacy especially in pharmacies who trade extended hours on weekdays and also on weekends and public holidays. We encourage Queensland Hospital and Health Services to consider greater partnerships with and take more advantage how their local community pharmacies can work with them;
- We wish to highlight an error in the issues paper which states that there is no mandatory training for
  pharmacy assistants. Whilst there may not be any legislated training requirements, pharmacy
  assistants must complete mandatory training for community pharmacies to be accredited under the
  QCPP (national quality assurance) program including mandatory training for all assistants who have

direct involvement in the sale of scheduled medicines or who work in the dispensary and also a minimum of 3 hours per year continuing education. Many pharmacy assistants are actually extremely highly trained and knowledgeable and provide extensive support to pharmacists in triaging and assisting patients, by following agreed protocols, who present with basic and uncomplicated health issues; and finally,

 We believe that the scope of pharmacy assistants could be extended. However, legislated frameworks around their training and skills and some form of registration would need to be introduced before this could considered further.

We are very happy for members of the parliamentary committee to contact us at any time should you wish to discuss the contents of our submission. We also invite the committee members to visit us in one of our pharmacies should this be deemed appropriate.

We wish you well in your deliberations on this important inquiry.

Yours Sincerely,

**Bruce Elliot** 

Pharmacist Proprietor/Partner

YEPPOON DAY & NIGHT PHARMACY

LIVELIFE PHARMACY YEPPOON CENTRAL

LIVELIFE PHARMACY KEPPEL BAY PLAZA

LIVELIFE PHARMACY GRACEMERE SHOPPINGWORLD

LIVELIFE PHARMACY GRACEMERE

Tom Lloyd

Pharmacist Proprietor/Partner

James Street, Yeppoon Keppel Bay Plaza, Yeppoon Yeppoon Central Shopping Centre, Yeppoon Gracemere Shoppingworld, Gracemere Lawrie Street, Gracemere