

Warner & Tricia Dakin

11 July 2018

Committee Secretary
HCDSDFVPC
Parliament House
George Street
Brisbane Qld 4000

Dear Sir/Madam,

Re: **Submission to the Parliamentary Inquiry into the establishment of a Pharmacy Council and Pharmacy Ownership in Queensland**

I am making this submission as an elderly man (79) in good health but required to take a range of prescription medicine to stay that way. I speak only from my own personal experience, but I feel it is not so different from that of many others, particularly the elderly.

It was the reading of an article in the Sydney Morning Herald dated 7-8 July 2018 headed "Digital a new headache for pharmacies" that alerted me to an alarming development within the pharmaceutical industry urging the consideration of the expansion of online pharmacies, a frightening prospect that would tend to increase the misuse of drugs and diminish services to those who really need them. I sincerely hope that the Commonwealth Government realizes that such a move would negate their pharmacy location rules that have worked so well to date.

Co-incidentally I was informed that a reconsideration of the Queensland Government's position regarding pharmacies is being undertaken by means of your inquiry, and I have therefore taken the steps to forward this submission because I feel that any change to the status quo should only be taken with the greatest caution.

In Support of Community Pharmacists

It is not possible to judge community pharmacies in the terms dictated by economic rationalism. Pharmacies are an **essential service** and must be operated with **integrity** by **qualified professionals**. Under any other conditions public health is jeopardized. The diminution of standards in the pharmacy sector should not be tolerated any more than it would be with general practitioners or nurses.

Pharmacists hold university degrees and these qualifications entail practical experience in pharmacies. This experience is provided by community pharmacy operators. Without a network of local pharmacies, this training would not be available.

Since the law wisely dictates that pharmacies must be owned or operated by qualified pharmacists, it is obvious that the owner/operator is entitled to make sufficient profit to justify not only a return on the high cost involved in operating a modern pharmacy, but also an income that justifies the years of study involved in becoming a pharmacist. These self-evident facts support each other to the point where if one element fails the whole collapses. Community pharmacies must be supported and protected from the harm big business and corporations have wreaked on other services.

It is not coincidental that pharmacists consistently rank in the top 3 in Roy Morgan “Image of Profession” surveys. Currently that ranking is 84% against Directors of Public Companies at 25% and Business Executives at 18%.

The Requirement for Caution About Change

The guidelines for submissions suggest that evidence should be provided to support opinions. I feel that my characterization of big business as harmful to services can be illustrated by consideration of the fate of delicatessens once supermarkets installed delicatessens which sell only basic products, to newsagents once supermarkets commenced selling newspapers, magazines and greeting cards, and to fruiterers and butchers when supermarkets started selling pre-wrapped fruit, vegetables, and prepacked meat. Since Bunnings opened massive hardware stores, almost all smaller competitors have disappeared. On the surface all of this may look like progress until a customer wants something that the buyers at Woolworths, Coles and Bunnings have decided is not worth stocking. And when the supermarkets bludgeon their way into gaining access to selling “Casket” tickets, who will sell a range of bereavement or sympathy cards, or slightly higher quality stationery, in a world of “home” brands?

Should corporations, drug manufacturing or wholesaling companies be allowed to cripple community pharmacies, experience shows that the variety of options available at present would soon be reduced to the big sellers, the high profit lines and the “home” brand items. Since ownership of medical practices is not restricted, it is conceivable that corporate owned pharmacies may ultimately own local medical practices, potentially compromising the validity of drug prescriptions.

Large “warehouses” selling cosmetics, hats, thongs and appliances with a pharmaceutical dispensary at the back are not a satisfactory substitute for smaller community pharmacies. With changing staff, no personal record keeping, and an atmosphere which discourages confidence in the customer, they cannot compete with the personal attention available in a community pharmacy, with its long-term owner/pharmacist and pharmacy assistants with whom the customers are more familiar. Furthermore, the cheaper prices claimed by the large warehouse chains are sometimes illusionary.

The recent experience of misleading advertising on packaging and in particular the dishonest packaging of analgesics by a pharmaceutical manufacturer validates any concern a consumer may have about the ethics of corporations.

Summation

Whatever changes are recommended by your committee, it is vitally important that the viability of community pharmacies is maintained and, if necessary, protected.

Thank you for this opportunity to present my concerns.

Warner Dakin