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***INQUIRY INTO THE ESTABLISHMENT OF A PHARMACY COUNCIL  
AND PHARMACY OWNERSHIP IN QUEENSLAND***

Dear Committee Members,

I wish to make this submission to the above inquiry.

Firstly, some of my background –

I have been a pharmacist for close on 50 years with a very wide background and experience in the profession, including working in pharmacy management, pharmacy owner, hospital work, a quality assurance assessor (QCPP) for seven years, and currently employed as a casual tutor in extemporaneous dispensing at the School of Pharmacy and Pharmacology at Griffith University, Gold Coast for the past 14 years and some casual tutoring for the Intern Training programme on Ethics and Legislation.

I have also served on the Pharmaceutical Society of Australia (Queensland Branch)’s Council and Committee for 22 years, with 11 of those years on the Executive including three years as President. I have also served on many of their committees before, during and after this time either as a member or Chair.

I served on the last Pharmacists Board of Queensland from 2007 to its conclusion on 30<sup>th</sup> June 2010 when the Pharmacy Board of Australia (PBA) commenced. I have also served on the PBA Registration and Notifications Committee from 2010 to 2011 and then as a Jurisdictional member (for Queensland) on the PBA Notifications Committee from 2011 to 2017.

***ISSUES FOR CONSIDERATION***

**Issues for consideration Nos.1 to 4.**

The issues of ownership of pharmacies being allowed by non-pharmacists in Australia have been raised on many occasions at various forums. These issues have been debated and always come to the conclusion that ownership should be in the hands of pharmacists (or other allowances as per the *Pharmacy Business Ownership Act 2001*). If a decision to allow ownership by non-pharmacists or other corporations was ever allowed, this decision could never be reversed if it was found to be a mistake.

A principal reason for pharmacist-only ownership is that pharmacists are controlled against any wrong-doings by authorities, such as the Pharmacy Board of Australia, The Office of the Health Ombudsman (OHO) (in Queensland only), the Health Insurance Commission and the Queensland Department of Health. These bodies can apply various sanctions against pharmacists. These vary according to the authority, with Queensland Health and the HIC usually prosecuting offences through the judicial system, and the Pharmacy Board of Australia being able to apply sanctions to a pharmacist including a caution and/or conditions on their registration. In very serious cases, the PBA can deregister a pharmacist. It must be remembered that the PBA applies these to protect the public.

I believe none of these (apart from fines) could be applied to a corporation owning a pharmacy. Sanctions, cautions, conditions on the registration or deregistration cannot be applied to the managers and directors of a corporation as they are not registered pharmacists so these would be meaningless.

Pharmacists are governed in many different ways. The PBA has a Code of Conduct which covers almost all aspects of a pharmacist's professional work. Also the Pharmaceutical Society of Australia regularly publishes *Professional Practice Standards* and *Code of Ethics for Pharmacists*. These are both endorsed by the PBA and all of these are used to sanction pharmacists.

Managers, directors and corporations could impose undue pressure or working conditions upon employee pharmacists which could easily result in sub-professional conduct, with no penalty being able to be levied against the managers or directors.

### **Issue for consideration No. 6.**

I believe that, if a Pharmacy Council was established in Queensland, one of its roles would be to examine the *Pharmacy Business Ownership Act 2001* to see if they believed that this Act does provide adequate protections to promote the professional, safe and competent provision of pharmacy services. I am not sure if this Act does do this adequately.

### **Issues for consideration Nos. 7 and 8.**

A Pharmacy Council should be established to determine whether transfers of pharmacy ownership did or did not conform to the Act. Similarly, offences prescribed in the Act may or may not be necessary and sufficient. Only a Pharmacy Council could properly determine both these issues for consideration.

**Issues for consideration Nos. 13 and 14.**

I believe the costs of setting up and running a Pharmacy Council would be relatively small compared with the advantage of the certainty that it would bring to the pharmacy profession. It should certainly consist of a majority of pharmacists with also a legal representative and a community member. Its members should have a broad range of experience in the profession.

**Issue for consideration No. 17.**

A potential risk to consumers is sub-professional conduct, as explained above under Issues 1 to 4.

**Issue for consideration No. 19.**

Pharmacy assistants mostly have various levels of training and qualifications, and become very useful as employees because of this training. There are several suppliers of this training, including the Pharmaceutical Society of Australia and the Pharmacy Guild of Australia. Unfortunately there has never been a record kept of these assistants and their qualifications in Queensland.

In 2008, while I was a member of the Pharmacists Board of Queensland, I wrote a paper about the regulations governing handling of scheduled medicines by non-professional staff in Queensland pharmacies, as shown in the then current *Health (Drugs and Poisons) Regulation 1996*. A perusal of the latest version of this regulation (*Current as at 9 March 2018*) shows that almost all of the regulations shown in 2008 have been deleted. This means that there are currently very few regulations governing non-professional staff. I believe this is a mistake as pharmacists have no guidance in the regulations to govern non-professional staff. I would envisage that one of the roles of a Pharmacy Council could be to examine this area to see if further legislation is necessary or needed.

Yours faithfully,

Peter Mayne