



13 July 2018

Committee Secretary
HCDSDFVPC
Parliament House
George Street
Brisbane QLD 4000

Dear Health, Communities, Disability Services and Domestic and Family Violence
Prevention Committee,

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

The Society of Hospital Pharmacists of Australia is the national professional organisation for more than 5,000 pharmacists, pharmacists in training, pharmacy technicians and associates working across Australia's health system. SHPA is committed to facilitating the safe and effective use of medicines, which is the core business of pharmacists, especially in hospitals.

SHPA is pleased to see the inquiry into the establishment of a pharmacy council in Queensland. SHPA does note that if a pharmacy council is formed, it must be representative from all sectors of the pharmacy industry and not chaired by any professional pharmacy body. The Chair would need to be an independent without a vested interest in the industry. In response to the HCDSDFVPC 's inquiry, the SHPA Queensland branch has made the following comments on the issues for consideration.

4. Should the Act be amended to allow any party to own a pharmacy, subject to requirements for dispensing only by a qualified pharmacist? Would the community be better off under such a scenario? Why or why not?

The SHPA Queensland Branch believes that opening pharmacy ownership to parties other than pharmacists has the potential to lead to a conflict of interest, depending on the ownership and interests of the party. This combination of medicines and primary healthcare, and the business model around pharmacy ownership is better understood by pharmacists. Pharmacists have an ethical and professional responsibility to patients as medicines experts. The expansion of pharmacy ownership to non-pharmacists could remove the balance that is currently in place in Australian community pharmacies.

In response to the federal Review of Pharmacy Remuneration and Regulation in 2016, on the specific issue of pharmacy ownership, SHPA has stated:

“SHPA supports a full review and revision of pharmacy ownership and location rules. SHPA believes the priority for regulation around the location and ownership of pharmacies should be to ensure equitable and optimal access for the Australian community. It is critical that ‘unintended’ service gaps for consumers are not created across the continuum as a result of location rules or funding models which do not prioritise the effective delivery of health services for the Australian community. The rules as they exist have not encouraged innovation to address providing equity of access. If they are to be maintained, the aims and objectives of the location and ownership rules should be shifted to become more consumer focused. The aim should be that all Australians have access to the medicines that they

require and the professional pharmacist services that are needed to support every consumer to safely and effectively use their medicines.”

13. How would the establishment of a pharmacy council in Queensland improve community outcomes?

Establishing a formal pharmacy council in Queensland will improve the performance and professionalism of community pharmacy by improving standards and links with other professional and regulatory bodies. This will foster a more robust review system of pharmacy services that are offered in the community setting, ensuring the delivery of the highest quality of care to the community, and complementing services delivered by the hospital pharmacy setting.

16. If a pharmacy council was established in Queensland, what issues would need to be considered in its interactions with other agencies or individuals involved in regulating pharmacy businesses and practice? What legislation would need to be changed?

The SHPA Queensland Branch believes that the pharmacy council and Queensland Health should have a joint commitment towards improving the health of the Queensland community. This entails a level of accountability through structured and transparent channels of communication and a joint goal and vision for the complex structure of community pharmacy business within Queensland. This will promote positive community health outcomes. The depth and breadth of joint activities and the sharing of information should also be considered and transparent.

18. Should the scope of practice of pharmacists and pharmacy assistants in Queensland be extended? If so, in what areas of practice?

The SHPA Queensland Branch strongly believes that the scope of practice for a pharmacist should be expanded to incorporate the following:

- Prescribing rights should be extended to pharmacists. SHPA is aware that the Pharmacy Board of Australia recently held a stakeholder forum on pharmacist prescribing and encourages Queensland Health to engage with the Pharmacy Board of Australia on this matter.
There are various models of prescribing that could be considered ranging from supplemental through to independent prescribing by pharmacists. It is beneficial to community health outcomes to have pharmacists being able to prescribe PBS items for long-term, stable chronic conditions.
This will support the delivery of efficient and safe care, as well as reducing GP visits when performed in community pharmacies. Pharmacists would also be able to assist with dose tapering and dose medication in accordance with approved protocols.
- Pharmacists should have the ability to administer vaccinations according to the Queensland Immunisation Schedule to all ages and access relevant MBS items to claim for these services.
- Pharmacists should be able to provide more consistent and available primary healthcare reviews, as long as these contribute to the care to the patient are not undertaken unnecessarily. i.e. blood pressure/glucose checks, wound care

monitoring, community medication reviews and rationalisation.

SHPA is an organisational member of Choosing Wisely Australia whose mission is to reduce unnecessary test

- s and treatments for patients.

19. What additional training for pharmacists/pharmacy assistants, or other risk reduction measures, should be implemented to ensure patient safety?

The Pharmacy Board of Australia requires a pharmacy assistant to be 'competent' either through a qualification or work-based training, however it is deficient in that it does not recognise the community and hospital setting are inherently different. Pharmacy assistants and technicians that work in hospital pharmacies have a much broader and specialised scope of practice compared to their community counterparts.

SHPA believes that a formal qualification designed for pharmacy technicians and assistants wishing to work in hospitals, is a better, standardised, more formal and robust way of ensuring this workforce is fit for purpose. Consistent qualifications and training for pharmacy assistants that is regulated by professional organisations will ensure pharmacy assistants and technicians to work within a defined scope of practice. This entails a clear career progression pathway for pharmacy assistants that can be regulated by professional bodies.

If you have any queries or would like to discuss our submission further, please do not hesitate to contact Johanna de Wever, General Manager, Advocacy and Leadership on

Yours sincerely,



Paul Firman
SHPA Queensland Branch Chair