

Public Health and Other Legislation (COVID-19 Management) Amendment Bill 2022

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**The Pharmacy
Guild of Australia**

15th September 2022

Committee Secretary
Health and Environment Committee
Parliament House QLD 4000
Via: hec@parliament.qld.gov.au

Re: Response COVID-19 legislation - Proposed changes to the *Public Health Act 2005*

In Queensland, there are over 1,200 community pharmacies across the state, delivering highly accessible health services, medicines and medication advice. The Pharmacy Guild of Australia (Guild) represents the owners of community pharmacies in Queensland and is committed to working with other healthcare professionals, stakeholders, community organisations, and Government to improve access to, and delivery of, safe and quality healthcare services to all Queenslanders.

We thank you for the opportunity to provide feedback on the proposed changes.

Community pharmacy and COVID-19

The community pharmacy network has been on the frontline of Queensland's response to the COVID-19 pandemic, ensuring continued access to medicines and primary health care services, as well as a source of education, advice and reassurance for all Queenslanders.

Community pharmacies are accessed by a broad range of the community. Queenslanders attending pharmacies for face-to-face health care services and those working within the pharmacies include persons who are more vulnerable to the adverse effects of COVID-19 should they contract it.

Measures and requirements introduced to prevent and minimise the risk transmission of COVID-19 in a community pharmacy are vital when there is a serious risk posed by COVID-19 in the community. The Chief Health Officer's public health directions assist community pharmacies with implementing these requirements by providing a clear legal basis for them to do so.

Proposed temporary amendments

The Guild is supportive of the proposed temporary amendments to the *Public Health Act 2005* which include:

- managing COVID-19 as a notifiable condition, without requiring a public health emergency to be declared; and
- amending the threshold conditions that apply to making directions, as well as enhancing the transparency and scrutiny of the directions.



Important consideration – Emergency Orders made under the *Medicines and Poisons Act 2019*

The [current emergency orders](#) made under section 58 of the *Medicines and Poisons Act 2019* have enabled a number of important advances, summarised below, in who can carry out certain regulated activities with regulated substances. These advances have been, and continue to be, a significant benefit to all Queenslanders in their ability to improve access to vaccination services and lifesaving medications in times of emergency.

Emergency orders are only permitted to be made by the chief executive in certain situations, including during a declared public health emergency under the *Public Health Act 2005*.

The Guild seeks confirmation from the Government that a legislative process is occurring to ensure these provisions are enabled permanently within the approved persons primary authorisation under the *Medicines and Poisons Act 2019* prior to the end of the declared public health emergency.

Emergency Order - COVID-19 Vaccination Service Providers - COVID-19 Vaccine and Influenza Vaccine	
Provision	Recommendation
<p>Under the emergency order, pharmacists are authorised to operate as per conditions with the Commonwealth and in line with Australian Technical Advisory Group (ATAGI) guidelines.</p> <p>There is currently no age restriction for administering the COVID-19 vaccination and influenza vaccinations are authorised to be administered to persons 5 years and older.</p> <p>This is in contrast with the Extended Practice Authority 'Pharmacists' which limits pharmacists administering vaccinations to persons 16 years and over for COVID-19 vaccines and 10 years and over for influenza vaccines.</p>	<p>With the recognised role of pharmacists in providing vaccination services (especially during the pandemic), continuing age restrictions in the Extended Practice Authority 'Pharmacists' limits patients access and is a very clear example of overregulation.</p> <p>The Guild recommends the Extended Practice Authority 'Pharmacists' is updated to state:</p> <ul style="list-style-type: none"> • Administration to persons recommended to receive vaccinations in accordance with the current online editions of the Australian Immunisation Handbook (which references statements issued by (ATAGI) on immunisation). • The pharmacist must comply with any other limitations in the product information or as determined by the Therapeutic Goods Administration approval for the vaccine that may apply. • Administration in accordance with the current online edition of the Immunisation Schedule Queensland.



The Pharmacy Guild of Australia

<p>Pharmacists are authorised to administer vaccinations off-site from the pharmacy premises.</p>	<p>The Guild is supportive of trained community pharmacists providing off-site clinics under the auspices of the authorisation of a community pharmacy.</p> <p>The community pharmacy has the responsibility to establish, oversee and manage a formal and effective clinical governance framework to ensure a safe and appropriate environment for the delivery of the service. This includes ensuring appropriate insurances are in place, staff are suitably qualified, clinical performance is monitored, appropriate ordering, handling and storage of stock, compliance with cold chain requirements, appropriateness of the clinical setting and more.</p> <p>The Guild recommends continuing the authority to administer vaccinations off-site from the pharmacy premises.</p>
<p><i>Possess to prepare</i> is listed as an authorised dealing.</p>	<p>The Guild seeks confirmation that under the existing <i>Schedule 9 Pharmaceutical professions of the Medicines and Poisons (Medicines) Regulation 2021</i> any reference to <i>possess</i> includes this dealing.</p>
<p>Trainee pharmacists being able to administer under supervision, as opposed to direct supervision in <i>Schedule 9 Pharmaceutical professions of the Medicines and Poisons (Medicines) Regulation 2021</i></p>	<p>Enabling appropriately trained pharmacy students to administer vaccinations to patients without the requirement for direct supervision from the pharmacist allows additional immunisation providers to contribute to the workforce.</p> <p>Under the <i>Medicines and Poisons (Medicines) Regulation 2021</i>, trainee pharmacists are permitted to administer vaccinations only under the direct supervision of the pharmacist, which significantly limits their ability to contribute to the vaccination effort.</p> <p>If the pharmacist is required to directly supervise the administration of the vaccination, then there is limited benefit for trainee pharmacists being trained and able to administer vaccines as both the pharmacist and the trainee pharmacist are required to be</p>



	<p>dedicated to the entire process of administering a vaccination to one patient.</p> <p>Changing the terminology to ‘supervision’, removes the requirement for the pharmacist to be physically present in the room with the trainee pharmacist and patient when the vaccination is administered, but does not remove the obligation for the pharmacist to supervise the clinical interaction as they have overall responsibility.</p> <p>The supervising pharmacist will clearly communicate supervision mechanisms, expectations, delegations and referral arrangements to the trainee pharmacist. This is a continual process as the trainee pharmacist professionally matures and gains competence on their pathway to provisional and then general registration.</p> <p>The Guild recommends the continuation of the supervision only provision to support agility and capacity when delivering vaccination services (particularly in situations where high volumes of services are needed).</p>
<p>Schedule 4 medicines – Enabling access without a prescription Pharmacist – Supply</p>	
<p>Provision</p>	<p>Recommendation</p>
<p>Under this emergency order, a pharmacist may supply a Schedule 4 medicine without a prescription when it is the person’s regular medicine and an extensive list of requirements are met.</p> <p>Note: This is not applicable to Schedule 8 medicines.</p> <p>The pharmacist must confirm the continuation of the supply is essential to the patient’s wellbeing, the patient has been recently prescribed the medicine and it is not practicable for the patient to see their prescriber.</p> <p>The pharmacist can only give the smallest available size of manufacturer’s pack.</p> <p>Without the emergency order, in many situations, the pharmacist may only give a</p>	<p>The disadvantages of limiting emergency supply to only 3 days are:</p> <ul style="list-style-type: none"> • The patient has an immediate need for these medicines and abrupt cessation of therapy could lead to poor health outcomes. • Apart from public health emergencies and natural disasters, patients can often encounter vulnerable circumstances that would be classified as an individual emergency (such as escaping domestic violence, urgent travel away from home etc) and allowing a patient only three days to see a prescriber can be unfeasible. • If their GP is not accessible within the three days (which is common with the current workforce shortages), it places an unnecessary burden on the patient to seek



limited 3 days' supply under the *Medicines and Poisons (Medicines) Regulation 2021*.

alternative means to obtain a prescription, which may include presentation at a hospital emergency department.

- In the event of an ongoing public health emergency, where medication shortages are more likely to occur, breaking standard manufacturing packs to supply three days' worth of doses is in effect wasting the remainder of the pack and exacerbating the shortage issue.

The Guild has been advocating for the removal of this 3 days' supply limit since 2019 and we are continually advised our request is under review whilst "detailed policy work is undertaken to consider impact".

The Department previously stated the 3 days' supply limit is in line with the National Poisons Standard and that is a reason for not changing.

However, when the Guild approached the Therapeutic Goods Administration in September 2021 for clarity, we were advised, "*the current Poisons Standard is implemented through state and territory legislation. While the states and territories usually adopt the current Poisons Standard by reference, each jurisdiction maintains the right to determine the extent of that adoption (if any).*" This communication can be provided on request.

There are no valid reasons for not continuing the current provisions.

The Guild recommends continuing the authority to provide the smallest available size of manufacturer's pack in these circumstances rather than returning to the limited 3 days' supply restrictions.



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Conclusion

Queensland's over 1,200 community pharmacies, provide access to life saving medicines and health care services every day. Over 75% of community pharmacies provide essential vaccination services. The loss of the current provisions in the emergency orders will severely restrict access to the services we provide to our communities and create workforce pressures on other parts of the health system.

We seek your support and assurance that when regulatory changes are being considered any provisions which would hinder community pharmacies in continuing to deliver these important services are removed.

Should additional information be required on our recommendations, I can be contacted on [REDACTED] or via email [REDACTED]

Yours sincerely

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