




Speech By
Joan Pease

MEMBER FOR LYTTON

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**HEALTH, COMMUNITIES, DISABILITY SERVICES AND DOMESTIC AND
FAMILY VIOLENCE PREVENTION COMMITTEE**

 **Ms PEASE** (Lytton—ALP) (3.19 pm): I rise to speak to the Health, Communities, Disability Services and Domestic and Family Violence Prevention Committee report No. 12, *Inquiry into the establishment of a pharmacy council and transfer of pharmacy ownership in Queensland*. Like all members of this House, I am fortunate to have a number of wonderful community pharmacies in my electorate. These hardworking and dedicated local pharmacists and pharmacy assistants bring so much and provide such an outstanding level of care, concern and compassion to baysiders. I thank them for their commitment and acknowledge their service, both current and historical. Pharmacists are an integral part of our healthcare system and our communities.

I would like to thank the secretariat, Rob Hansen and his amazing team, for their careful and thorough work on this inquiry. May I also acknowledge my colleagues on the committee: the member for Thuringowa, Chair Aaron Harper; the member for Caloundra, Mark McArdle; the member for Maiwar, Michael Berkman; the member for Nicklin, Marty Hunt; and the member for Rockhampton, Barry O'Rourke. I thank them for their genuine interest and enthusiasm and the truly bipartisan approach they adopted in relation to this work, mindful of the very significant role pharmacists and pharmacy assistants play in delivering health care in Queensland.

In May 2018, the Health, Communities, Disability Services and Domestic and Family Violence Prevention Committee was tasked with inquiring into the establishment of a pharmacy council and the transfer of pharmacy ownership in Queensland. The committee published a detailed issues paper inviting written submissions and we received and published 210 submissions. We requested the Auditor-General conduct an audit of the administration of transfer of pharmacy ownership by the Department of Health for compliance with the Pharmacy Business Ownership Act 2001 and we wrote to the Deputy Premier requesting that the Queensland Productivity Commission conduct an independent cost-benefit analysis of the establishment of a pharmacy council in Queensland.

We held five public hearings, including hearings in Brisbane, Toowoomba, Cairns and Townsville to examine the issues raised by submitters and we met with representatives from the Victorian Pharmacy Authority in Melbourne and sought expert advice from the Department of Health. The committee's inquiry focused on four key issues: the benefits of extending the scope of practice for pharmacists and pharmacy assistants; the administration of transfers of pharmacy ownership by the Department of Health; the pharmacy ownership requirements specified in the Pharmacy Business Ownership Act 2001 and the merits of establishing a separate statutory authority such as a pharmacy council to administer transfers in pharmacy ownership. I thank all submitters to our inquiry and others from the health sector who shared their passion, knowledge and experience for their roles providing health care in Queensland.

We gained invaluable information from organisations such as the Pharmacy Board of Australia, the Pharmacy Guild of Australia, the Australian Pharmaceutical Society, the Australian Medical Association and other medical groups, the Auditor-General and the team at the Queensland Audit Office who reviewed pharmacy business transfers and ownership in Queensland over the last two years and whose audit report resulted in a number of recommendations for the health department.

I commend the many community pharmacists who serve their local communities each and every day across our vast state in our cities and in our regional and rural areas and those who participated in our inquiry and who travelled to give evidence. I also thank those pharmacists from the larger franchise pharmacy businesses who also play a valuable role in the pharmacy space, including those embedded in health and hospital services. In the bayside, as I have said, we are fortunate to have a strong network of dedicated community pharmacies with outstanding pharmacists and pharmacy assistants who participate in the very fabric of our community and are often the first care providers and sometimes the only contact for some locals.

During the inquiry we saw the potential for pharmacists to do more than they currently do—with some prescribing of medications in low-risk situations subject to a range of safeguards. However, the committee noted that the AMA and other bodies raised concerns during the inquiry about expanding pharmacists' scope of practice. The committee made 11 recommendations and in framing our recommendations we sought to allay the concerns of the medical profession about changes to pharmacists' scope of practice by including a number of safeguards as part of the more collaborative approach to prescribing. We heard from many pharmacists that they have a great working relationship with their local GPs and we hope that this will continue and strengthen as pharmacists play an important role in our communities. I commend the report to the House.