



Public consultation on draft revised Board guidelines

28 April 2015

Pharmacy Council of NSW - Response to consultation questions

Please provide your feedback as a Word document (not PDF) by email to pharmacyconsultation@ahpra.gov.au by close of business on Friday 1 May 2015.

Stakeholder Details

If you wish to include background information about your organisation please provide this as a separate word document (not PDF).

Organisation name
Pharmacy Council of New South Wales
Contact information <i>(please include contact person's name, position title and email address)</i>
Nina Beeston Executive Officer, Pharmacy Council of NSW [REDACTED]
Submissions will generally be published unless you request otherwise. Do you want all or part of it treated as confidential?
No

Your responses to consultation questions on the draft revised guidelines

Guidelines for dispensing of medicines <i>Please provide your responses to any or all questions in the blank boxes below</i>
1. From your perspective, how are the current <i>Guidelines for dispensing of medicines</i> working?
The Guidelines are working reasonably well
2. Is the content and structure of the draft revised guidelines helpful, clear, relevant and more workable than the current guidelines?
Yes, the Council considers the revised guidelines to be more workable
3. Is there any content that needs to be changed or deleted in the draft revised guidelines?

Guidelines for dispensing of medicines

Please provide your responses to any or all questions in the blank boxes below

Point 7.1 Labels - There is a reference to "pack and "packages" in this section. There needs to be consistency and the use of one term only. "Pack" is the term used through the remainder of the document.

Point 11 - The Council is of the view that there is more need for guidance regarding pharmacists' workload of 150-200 items per day. The addition of "not exceeding an average of 20 prescriptions per hour" in this statement would assist.

The Council also is of the view that with the extra demands being required of pharmacists, the employment of a dispensary technician is necessary once workload exceeds 100 prescriptions per day.

Point 12.3 – There is a need for "interns" to be included in the pharmacists' responsibilities for supervision.

4. Is there anything missing that needs to be added to the draft revised guidelines?

The number of dispensing terminals available should be stipulated – one terminal for each person involved in the dispensing process.

Page 22 Definitions – while supervision of interns is mentioned or implied at various points within the Guidelines, the definition of supervising pharmacist does not include any reference to interns.

5. Do you have any other comments on the draft revised guidelines?

No further comments

6. Do you think that that the proposed review period of five years, with the option to review earlier if the need arises, is appropriate?

Yes, the proposed review period is appropriate

The Board has also noted the potential for advancements in technology to change the way that pharmacists deliver particular pharmacy services. It has decided to explore through this consultation, the views of its stakeholders and the public about the possible inclusion of further guidance for pharmacists on the use of technology in the delivery of pharmacy services.

7. Is guidance for pharmacists required to address the use of information and communication technology, including, but not restricted to videoconferencing, internet and telephone, as an alternative to face-to-face delivery of pharmacy services?

Yes, guidance is required

8. If guidance is required, what should it specifically address?

- 1) The requirement for documentation of all patient interactions whether conducted face to face, via telephone or the internet
- 2) The requirement for pharmacists to work with eHealth initiatives e.g. PCEHR ,My Health Record or other applications which will support the transition of care between health care sectors and providers.

9. Is the provision of explanatory information for pharmacists instead of a guideline a suitable alternative approach to address the use of information and communication technology in the delivery of pharmacy services?

The Council considers guidelines would be preferable.

Guidelines for dispensing of medicines

Please provide your responses to any or all questions in the blank boxes below

Guidelines on practice-specific issues

Please provide your responses to any or all questions in the blank boxes below

10. From your perspective, how are the current *Guidelines on practice specific issues* working?

The Council considers the current Guidelines to be workable

11. Is the content and structure of the draft revised guidelines helpful, clear, relevant and more workable than the current guidelines?

Yes, the revised guidelines are more workable and Option 2 is the Council's preference

12. Is there any content that needs to be changed or deleted in the draft revised guidelines?

Sections 5 and 6 have some inconsistency in descriptions in the use of "therapist" and "practitioner" delivering alternative medicines services. Perhaps the use of "therapist" in all places where "alternative medicines therapist" is used, with this included in the definitions.

13. Is there anything missing that needs to be added to the draft revised guidelines?

No further additions are considered necessary

14. Do you have any other comments on the draft revised guidelines?

No further comments

15. Do you think that that the proposed review period of five years, with the option to review earlier if the need arises, is appropriate?

The Council is of the view that the review period is appropriate

Guidelines on dose administration aids and staged supply of dispensed medicines

(Currently titled *Guidelines on specialised supply arrangements*)

Please provide your responses to any or all questions in the blank boxes below

16. From your perspective, how are the current *Guidelines on specialised supply arrangements* working?

The Council considers the current Guidelines to be workable

17. Is the content and structure of the draft revised guidelines helpful, clear, relevant and more workable than the current guidelines?

Yes, the draft revised guidelines are more workable and Option 2 is Council's preference

<p>Guidelines on dose administration aids and staged supply of dispensed medicines (Currently titled <i>Guidelines on specialised supply arrangements</i>)</p> <p><i>Please provide your responses to any or all questions in the blank boxes below</i></p>
18. Is there any content that needs to be changed or deleted in the draft revised guidelines?
<p>Page 38 - Dose administration “container” is used in the “Summary of Guidelines” paragraph. There needs to be consistency of terms used.</p> <p>Pages 41 and 42 - Consideration should be given to the inclusion of a definition of “supervising pharmacist” with respect to the use of unregistered staff in the preparation of DAAs. There have been reported instances of use of separate professional services rooms which are not adjacent to or co-located within the pharmacy premises. In these instances, unregistered staff have access to scheduled medicines when packing DAAs without the required “supervision”.</p>
19. Is there anything missing that needs to be added to the draft revised guidelines?
No
20. Do you have any other comments on the draft revised guidelines?
<p>1.2 Labelling of DAAs. There is a need for the dot point list to be more inclusive of the requirements i.e to state that the name, strength, dose form, directions and cautionary advisory labels are to be included for all medicines in the DAA</p> <p>There would be benefit in adding some guidance regarding the provision of information about other medicines not included in the DAA e.g. unstable medicines / eye drops / inhalers / or other DAA to enhance awareness for patients / carers.</p>
21. Do you think that that the proposed review period of five years, with the option to review earlier if the need arises, is appropriate?
Yes, the review period is appropriate

<p>Guidelines for proprietor pharmacists (Currently titled <i>Guidelines on responsibilities of pharmacists when practising as proprietors</i>)</p> <p><i>Please provide your responses to any or all questions in the blank boxes below</i></p>
22. From your perspective, how are the current <i>Guidelines for proprietor pharmacists</i> working?
The Council considers the current Guidelines to be working reasonably well
23. Is the content and structure of the draft revised guidelines helpful, clear, relevant and more workable than the current guidelines?
<p>Yes, the revised guidelines are more workable and Option 2 is the Council's preference</p> <p>The title change is most appropriate as there are absentee owners who do not consider that they are practising as pharmacists</p>
24. Is there any content that needs to be changed or deleted in the draft revised guidelines?
No need for changes

Guidelines for proprietor pharmacists (Currently titled <i>Guidelines on responsibilities of pharmacists when practising as proprietors</i>) <i>Please provide your responses to any or all questions in the blank boxes below</i>	
25. Is there anything missing that needs to be added to the draft revised guidelines?	
	<p>With changes to the scope of pharmacy practice, notably the administration of vaccines, there may be a need to consider including additional and /or specific comment regarding the environment needed for delivery of these services.</p> <p>In addition to PSA and SHPA Professional Practice Standards there are other guidelines which exist e.g. NSW PGA Guidelines regarding the delivery of vaccines. It may be appropriate to refer to these and to ensure currency “to any other relevant contemporary standards that might be developed from time to time”</p>
26. Do you have any other comments on the draft revised guidelines?	
	No further comments
27. Do you think that that the proposed review period of five years, with the option to review earlier if the need arises, is appropriate?	
	Yes, the review period is appropriate

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