

Thank you for the opportunity to respond to your consultation.

The Pharmacy Council is in agreement with the intention of your guidelines and recent changes here reaffirms a position that the Pharmacy Council has held since its inception and were consistent with the approach under the now revoked Pharmacy Act 1970.

The licensing of pharmacies is not the responsibility of the regulatory authority, Pharmacy Council, as it comes under the Health Practitioners Competence Assurance Act 2003, and no longer has powers relating to medicines licences. This role is carried out by Medicines Control on behalf of the Minister of Health, and under the Medicines Act 1981, pharmacists are defined as those registered with the Pharmacy Council. It does not clarify the further difference between practitioners who hold an annual practising certificate and those that have chosen to remain on the register, but are not actively practising and hold a practising certificate.

In response to queries from pharmacists regarding the requirement to hold a practising certificate if a proprietor and given that the scope of practice of a pharmacist includes pharmacists who are managing pharmacies, whether or not they have direct patient contact, all such owners (license holders) are required to hold APCs. Clarity was sought as to whether those who do not have any influence on the management of the pharmacy, but are merely license holders, need to still hold an APC.

The Council policy, set in September 2005, is the following:

1. All pharmacists who are deemed “responsible persons” for the purpose of obtaining a license to operate a pharmacy must hold an Annual Practising Certificate
2. All pharmacists who hold a license to operate a pharmacy must hold an Annual Practising Certificate unless they can demonstrate that they do not manage the pharmacy and that no activity that they undertake as a license-holder directly or indirectly influences clinical practice and/or public safety.

In practise, Medicines Control did not enforce this recommendation as the interpretation of the Medicines Act 1981 in this case wasn't clear.

However, following recent legal advice and consultation with stakeholders, Medicine Control now (since September 2010) require all majority pharmacist shareholders to hold Annual Practising Certificate.

There has been some concern that pharmacists living overseas exercise limited governance over their pharmacies, and this step is seen as means of minimising the likelihood of this in future. There is a possibility that some pharmacists will continue to apply for a practising certificate but not actually practise pharmacy in New Zealand. As the two processes (registration of a pharmacist and a pharmacy) are separate in New Zealand, some cases will be harder to manage than I would envisage for something similar in Australia.

The obligation to undertake the prescribed continuing professional development programme will be difficult for such pharmacists.

There is no current requirement for minimum hours of practice in New Zealand in order to hold a practising certificate, although pharmacists who have not practised for 3 years must complete a return to practise programme before gaining an unconditional certificate. The requirement set in Australia of 450 hours of practise in 3 years, may gain traction here.

I trust this information is useful.
Kind regards
Owain

Owain George Ph.D. BPharm RegPharmNZ MPS
Competence Policy Advisor



Pharmacy Council of New Zealand

PO Box 25 137

Wellington 6146

DDI +64 4 4950337

Fax +64 4 495 0331

E-mail: o.george@pharmacycouncil.org.nz

Website: www.pharmacycouncil.org.nz

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