



## Communiqué

**3 June 2013**

The Pharmacy Board of Australia (the Board) met on 24 May 2013 at the national office of the Australian Health Practitioner Regulation Agency (AHPRA) in Melbourne.

### Health profession agreement

The Board is in the process of finalising its budget for 2013-14. This is part of the process of finalising the health profession agreement (HPA) with AHPRA for the same period. The HPA will outline how AHPRA will support the Board and enable the Board to fulfil its functions under the National Law and its primary role to protect the public. The HPA will also include details of fees set by the Board including fees for registrants. The fees set by the Board will be published on the Board's website prior to their date of effect, 1 July 2013.

### Supply of Schedule 3 poisons (*pharmacist only medicines*)

Guideline 4 of the Board's *Guidelines on practice specific issues*, published on its [website](#), highlights to pharmacists their obligation to observe their statutory responsibilities regarding the supply of pharmacist only medicines. Additionally, Guideline 4 also includes guidance on the supply of appropriate quantities of these medicines.

Pharmacists must be satisfied that there is a therapeutic need for a pharmacist only medicine. As outlined in Guideline 4, this means more than agreeing to supply the medicine on request, or merely asking patients if they have used the medicine previously and know how to use it.

Pharmacists may receive requests from consumers for specific pharmacist only medicines by brand name as a result of advertising of these medicines. This does not abrogate the pharmacist's statutory obligation to establish a therapeutic need and to determine whether supply should occur.

### Community Reference Group appointed

A Community Reference Group has been established to work with AHPRA and the National Boards as part of the National Registration and Accreditation Scheme (National Scheme). The group will advise AHPRA and the National Boards on engaging with communities.

The group will have a number of roles, including providing feedback, information and advice on strategies for building better knowledge in the community about health practitioner regulation, but also advising AHPRA on how to better understand, and most importantly, meet, community needs.

Further information is available on the Board's [website](#).

Stephen Marty  
Chair  
3 June 2013