



Communiqué

2 October 2013

The Pharmacy Board of Australia met on 20 September 2013 at the national office of the Australian Health Practitioner Regulation Agency (AHPRA) in Melbourne.

Registration renewal

The 2013 on-line renewal of registration function for pharmacists is now available on the Board's [website](#).

Over 25,700 pharmacists with general or non-practising registration are due to renew their registration with the Board by 30 November, the registration renewal date for pharmacists.

Last year over 90 per cent of all health practitioner registration renewals due by 30 November were submitted online which shows how easy on-line renewal is.

You can check your registration details and expiry date on the [national registers of practitioners](#).

Make sure your contact details provided to AHPRA, including email, are current as you will be sent reminders when your registration is due. Look for these reminders from AHPRA as confirmation that online renewal is open. After receiving your reminder, go to the [AHPRA login page](#).

See [fees](#) for the cost of annual renewal, including the late payment fee for renewal applications received during December.

You are advised to carefully read the Pharmacy Board's [registration standards](#) which specify the requirements for practice before applying for renewal of their registration. You must ensure you understand the declarations you are required to make about meeting the Board's registration standards as information to support your declarations may be sought.

AHPRA, on behalf of the Board, is sending out a series of reminders to pharmacists with a registered email address.

It is important that you make sure AHPRA has your current contact information so you don't miss future email and hard copy reminders to renew.

To update contact details using AHPRA's secure online services, pharmacists can visit www.ahpra.gov.au:

- go to the bottom of the home page
- click on *Update Contact Details* under Services for Practitioners
- use their user ID and secure password, and
- follow the prompts.

Under the National Law, all registered pharmacists are responsible for renewing their registration on time each year.

The following pages on the Pharmacy Board website contain useful information for pharmacists:

- [Registration standards](#)
- [Registration renewal](#)
- [FAQ for pharmacists](#)

Important registration renewal dates

30 November: Expiry of your registration.

1 December: Start of late period (late payment fee plus registration renewal fee if unpaid).

1 January: Registration lapses (your name is removed from the national register if still unpaid).

For more information

- Visit www.pharmacyboard.gov.au
- Visit www.ahpra.gov.au under *Contact us* to lodge an online enquiry form
- For registration enquiries: 1300 419 495 (within Australia) +61 3 8708 9001 (overseas callers)

Audits

AHPRA and the National Boards are developing a nationally consistent approach to auditing health practitioners' compliance with mandatory registration standards. Pilot audits have been conducted which were designed to determine the frequency, size and type of audits required and establish our ongoing audit methodology. As such, Pharmacists should note that auditing may occur at any time i.e. not as part of the renewal process; and ensure evidence (records of activities which meet the requirements of the standard) are retained for three years.

Each time a practitioner applies to renew their registration; they must make a declaration that they have met the registration standards for their profession. Practitioner audits are an important part of the way that National Boards and AHPRA can better protect the public by regularly checking these declarations made by a random sample of practitioners. They help to make sure that practitioners are meeting the standards they are required to meet and provide important assurance to the community and the Boards.

Auditing of all professions has commenced. If you are selected for audit you will be notified in writing and requested to provide evidence that you meet the requirements of the standard.

Further information will be available shortly on the Pharmacy Board of Australia website.

Continuing professional development

The current continuing professional development period for pharmacists commenced on 1 October 2013. The Board confirms that between the period 1 October 2013 and 30 September 2014, pharmacists will be required to achieve at least 40 CPD credits in accordance with the current [Continuing professional development registration standard](#) and [Guidelines on continuing professional development](#).

The registration standard and guidelines which outline requirements until 30 September 2013, are part of the current review of registration standards, codes and guidelines. The Board advised in its August 2013 communique that it is currently reviewing these documents and as part of the public consultation process, these draft revised documents will be published on the Board's website later in 2013. Whilst consultation occurs, there is no change to the current requirement for pharmacists to achieve 40 CPD credits annually. If any change to the annual CPD requirement for pharmacists is supported by feedback to the Board's consultation on registration standards and guidelines, details will be published in the revised registration standard approved by Ministerial Council and guidelines approved by the Board.

The Board has further information regarding the CPD requirements in the form of answers to [frequently asked questions](#) and other information published on the Board's [website](#).

Quarterly registration data released

The Board has released quarterly registration data. The data profiles Australia's pharmacy workforce, including information on types of registration held, principal place of practice, registrant age and gender. Publication of quarterly data that accurately reflects the number of registered health practitioners is one essential benefit of the National Scheme. The National Scheme requires that information about every registered health practitioner in Australia is published on a single national [register of practitioners](#), which is published online.

Visit the Board [website](#) to view the quarterly registration data.

Dextropropoxyphene

On 12 September 2013 the Administrative Appeals Tribunal issued its decision in *Aspen Pharmacare Australia Pty Ltd and Minister for Health and Ageing* [2013] AATA 649 [[decision](#)]. As explained below, the decision allows two products that contain dextropropoxyphene, Di-Gesic and Doloxene, (**'the Products'**) to remain on the market and imposes new administrative burdens on Pharmacists who wish to continue supplying them.

In early 2012, the Minister for Health and Ageing decided to cancel the registration of the Products on the Australian Register of Therapeutic Goods. Aspen sought review of this decision in the Administrative Appeals Tribunal. The Tribunal ultimately decided that the Products should remain on the Register, subject to Aspen complying with certain conditions. Amongst other things, Aspen must enter into contracts with pharmacists (other than hospital pharmacists) who wish to continue to supply the Products. The contracts will require the pharmacists to, amongst other things, obtain information from prescribers before dispensing the Products and provide information to Aspen to ensure this requirement has been complied with.

The Tribunal has required Aspen to write to pharmacies within a month of the Tribunal's decision, explaining in detail the requirements for continued dispensing of the Products. Aspen's letter must set out in detail the obligations pharmacists will have to agree to if they wish to continue dispensing the Products.

The Board noted the decision with concern given that products containing dextropropoxyphene have been removed from the market by medicine regulators in a number of countries. It is also concerned about the ramifications for pharmacists in that additional requirements must be complied with if supplying these products.

Dispensing errors

The Board's Notification Committee has also noted with concern, a number of recent errors involving drugs with a narrow therapeutic index including digoxin and methotrexate which in two instances resulted in fatalities. These errors have resulted from a number of contributing factors including failure to scan the barcode at the end of the dispensing process, the inclusion of confusing directions on labels and in the case of digoxin 250mcg being supplied when 62.5mcg was prescribed. The consequences of such mistakes should be well known to all pharmacists. The families of the victims of these errors do not accept excuses of "I was too busy" given that taking action to address excessive workload and counselling including final checking by a pharmacist are clearly addressed in professional practice standards and Board guidelines.

Stephen Marty
Chair
2 October 2013