



Communiqué

27 June 2014

The Pharmacy Board of Australia (the Board) met on 20 June 2014 at the national office of the Australian Health Practitioner Regulation Agency (AHPRA) in Melbourne.

Pharmacists' workloads

The Board is concerned that there are some pharmacists who fail to practise in accordance with the Board's *Guidelines for dispensing of medicines* (dispensing guidelines), particularly in relation to recommended dispensing levels. Excessive workloads on pharmacists contribute to work-related pressure and stress. They may hinder the ability of pharmacists to meet their professional obligations such as review of the patient's medication history and provision of medication counselling, and may contribute to the occurrence of dispensing errors.

The Board draws pharmacists' attention to the guidance on 'Pharmacists' workloads' in the dispensing guidelines, which recommends that if dispensing levels for a pharmacist are in the range of 150-200 items per day, trained dispensary assistants and/or intern pharmacists should be utilised, and that if the dispensing workload exceeds 200 items per day, additional pharmacists or dispensary assistants may be required. Other factors such as the utilisation of advanced dispensing technologies should be taken into account. This is a guide to assist pharmacists in ensuring that adequate time is allowed to dispense every prescription or order in accordance with professional practice standards and Board guidelines.

The Board acknowledges that workloads may vary from hour to hour and day to day, and that pharmacists may be required to dispense above the recommended rate in unforeseen circumstances. However, the Board expects that pharmacists (including managers), directors of hospital pharmacy departments and pharmacy owners take appropriate steps to ensure that the workload of pharmacists is reasonable and manageable to enable professional obligations to be met. Pharmacy owners are reminded of their responsibility to ensure that the pharmacy is suitably resourced and that staff members are sufficiently trained, as outlined in the Board's *Guidelines on responsibilities of pharmacists when practising as proprietors*.

Pharmacists are reminded that non-compliance with Board guidelines may be used in disciplinary proceedings under the Health Practitioner Regulation National Law, as in force in each state and territory (the National Law), as evidence of what constitutes appropriate professional conduct or practice for pharmacists. When considering notifications (complaints) against pharmacists, including those which might relate to a dispensing error, the Board will give consideration to whether a breach of their guidelines has taken place.

As part of the Board's current review of its registration standards, codes and guidelines, draft revised *Guidelines for dispensing of medicines* have been developed. The Board will be seeking feedback on these guidelines through preliminary and public consultation over the coming months, including feedback on the proposed guidance on 'Pharmacists' workloads'. Pharmacists are encouraged to participate in the public consultation on these guidelines to have their views heard.

Pharmacists are also referred to a resource titled "[Workplace Pressures in Pharmacy: Practical advice for New Zealand pharmacists, pharmacy staff and employers](#)" by the Pharmacy Council of New Zealand, which contains very useful tips on workplace pressures, including workload, that are also relevant to the Australian pharmacy context.

Pharmacy oral examination (practice) candidate guide

The Board has published an updated guide to its oral examinations for candidates. The revised *Pharmacy oral examination (practice) candidate guide* (the candidate guide) is published on the Board's [website](#). Interns undertaking examinations from October 2014 are advised to review the updated guide. There are no changes to the structure and content of the oral examination. The candidate guide provides information about the examination, its administration and rules to assist interns in their preparation for the oral examination (practice).

Queensland – new arrangements for handling notifications from 1 July 2014

From 1 July 2014 a new law comes in to effect in Queensland, the *Health Ombudsman Act 2013*.

From this date, all complaints about Queensland health practitioners will be received by the Office of the Health Ombudsman (OHO) who will either manage the matters or refer them to the relevant National Board to manage.

Complaints that were made to AHPRA or National Boards before 1 July 2014 will generally continue to be managed by AHPRA on behalf of National Boards. However, under the new law the Office of the Health Ombudsman can request that a matter be referred to them to be managed. If this were to happen, AHPRA will inform both the notifier and the practitioner who is the subject of the notification.

For information about the Office of the Health Ombudsman please go to www.oho.qld.gov.au or call 133 646 (133 OHO).

Public consultation on registration standards and guidelines closes 30 June 2014

The Board is currently consulting on the following revised registration standards and guidelines:

- *Professional indemnity insurance registration standard*
- *Continuing professional development registration standard* and related guidelines
- *Recency of practice registration standard* and related guideline
- *Supervised practice arrangements, and*
- *Examinations for eligibility for general registration*

The Board is also consulting on *Guidelines for compounding of medicines* for pharmacists and a draft *Professional practice profile for pharmacists undertaking complex compounding*.

The consultation papers are published under [Current consultations](#) on the Board's website.

The consultation process to date has included research and preliminary consultation with stakeholders prior to finalisation of the drafts for public consultation.

Consultation will close on 30 June 2014 and the community, stakeholders, pharmacists and other health practitioners are welcome to make a submission.

Data access and research policy

AHPRA and National Boards regularly receive requests for access to data about registered practitioners. The *Data access and research policy* was developed by AHPRA and National Boards to maximise benefits that data access can bring, while managing risks to the privacy of practitioners whose information we have collected and hold for the purposes of the National Law and other statutory obligations.

The policy is available on the AHPRA [website](#).

Stephen Marty
Chair
27 June 2014