**Communiqué**

**10 June 2015**

The Pharmacy Board of Australia (the Board) met on 22 May 2015 in Melbourne.

**Revised English language skills registration standards taking effect from 1 July**

From 1 July 2015 two new registration standards for English language skills will come into effect: a profession-specific standard for nursing and midwifery; and a common standard for 12 professions; Chinese medicine, chiropractic, dental, medical, medical radiation, occupational therapy, optometry, osteopathy, pharmacy, physiotherapy, podiatry and psychology.

These new standards were developed following a review of the existing standards, which included public consultation.

National Boards recognise the fundamental importance of ensuring that health practitioners practising in Australia have English language skills which support them to communicate effectively with patients, relatives and other healthcare professionals. The intent of the new standards is to balance this need for public protection while providing a small amount of reasonable increased flexibility for applicants. Accordingly, the revised standards establish additional ways in which health practitioners may be able to demonstrate that they meet the National Boards’ English language skill requirements.

**Who it applies to**

This change applies to:

* all individuals applying for initial registration as a pharmacist (provisional, limited and general registration) in Australia after 1 July 2015 if they are currently unregistered in Australia, and.
* all individuals applying for registration as a pharmacist (including moving from non-practising to another registration type) who have not used English as their primary language for more than five years.

What the change means for pharmacists

* The changes will not affect currently registered pharmacists unless they let their registration lapse and apply for registration again at a later date or apply for a different type of registration in circumstances where they have not used English language for more than five years. If this happens, they will need to meet the new standard.
* The level of English language skills required has changed slightly for pharmacy from the old standard. Applicants for provisional and limited registration will be required to meet the requirements of the standard. Previously the standard only applied to applicants for general registration.
* From 1 July 2015, applicants relying on the test results of IELTS (academic module) are required to achieve a minimum overall score of 7 and a minimum score of 7 in each of the four components (listening, reading, writing and speaking). Applicants will also have a small amount of increased flexibility in the ways that they can demonstrate that they meet the standard.
* Practitioners who need to take an English language test to demonstrate that they meet the standard are now able to choose between four different tests. The four tests are also used by the Department of Immigration and Border Protection for visa purposes.
* Individuals will be able to count the results of up to two sittings in a six month period, within strict parameters and provided certain minimum scores are maintained.

Transition arrangements

The Board is currently assessing the need for transition arrangements in particular circumstances for a limited period of time. These details will be finalised and published on the Board’s website prior to 1 July 2015. Any queries about this should be directed to the Board via the Australian Health Practitioner Regulation Agency.

For more information

* Lodge an [online enquiry form](https://www.ahpra.gov.au/About-AHPRA/Contact-Us/Make-an-Enquiry.aspx)
* For registration enquiries: 1300 419 495 (within Australia) +61 3 9275 9009 (overseas callers)
* For media enquiries: (03) 8708 9200

**Revised criminal history registration standard will take effect from 1 July**

A revised criminal history registration standard will come into effect for all registrants from 1 July 2015.

National Boards published the contents of the revised shared criminal history registration standard for all registered health practitioners, which is common to all National Boards and takes effect from 1 July 2015.

Whenever possible, National Boards seek to work together to develop common or similar standards across professions.

The revised criminal history registration standard has been approved by the Australian Health Workforce Ministerial Council and makes very minor amendments to the old standard. The changes are expected to have minimal impact on practitioners as no changes have been made to the factors National Boards will take into account when considering an applicant's or registrant’s criminal history.

When an individual first applies for registration, the National Board requires the applicant to declare their criminal history in all countries, including Australia. All registered health practitioners must inform their National Board if they are:

* charged with an offence punishable by 12 months imprisonment or more, or
* convicted or found guilty of an offence punishable by imprisonment in Australia and/or overseas.

When practitioners renew their registration they must disclose any changes to their criminal history.

More information about how criminal history checks are conducted are available on the [criminal history checks](http://www.ahpra.gov.au/Registration/Registration-Process/Criminal-history-checks.aspx) page on the AHPRA website, including which checks are required from countries other than Australia for [some applicants and registrants](http://www.ahpra.gov.au/Registration/Registration-Process/Criminal-history-checks/International-Criminal-History.aspx).

**Quarterly registration data**

The Board publishes quarterly data profiling Australia’s pharmacy workforce.

At March 2015, there were a total of 28,950 registered pharmacists comprising the following number of registrants according to registration type:

* 26,025 – general registration
* 1,910 – provisional registration
* 13 – limited registration
* 1,002 – non-practising registration

The quarterly registration data at March 2015 for the pharmacy profession is published on the Board’s website ([www.pharmacyboard.gov.au/About/Statistics.aspx](http://www.pharmacyboard.gov.au/About/Statistics.aspx)). It includes a number of statistical breakdowns.

Compounding of medicines

In its April 2015 communiqué the Board advised the commencement of the *Guidelines on compounding of medicines* (the guidelines), with the exception of the section *Expiry of compounded parenteral medicines* which has been postponed for three months.

The postponement of this section will provide additional time to consider feedback and information on the proposed guidance about the expiry of compounded medicines that needs further investigation and review.

The Board is currently consulting with the Therapeutic Goods Administration (TGA) about the feedback received and will provide further information to clarify the proposed guidance.

The Board published frequently asked questions (FAQ) to provide pharmacists and the public with additional information and clarification on a range of issues relating to the compounding of medicines. The FAQ are published on the [FAQ and Fact Sheets](http://www.pharmacyboard.gov.au/Codes-Guidelines/FAQ.aspx?utm_source=email&utm_medium=linktoFAQpage&utm_campaign=compoundingFAQrelease) page on the Board’s website.

The *Guidelines on compounding of medicines* were subject to wide-ranging consultation and replace Guideline 5 *Extemporaneous dispensing (compounding)* from the Board’s *Guidelines for dispensing of medicines*. Guideline 5 was in effect until 27 April 2015. The current guidelines are published on the [Codes, Guidelines and Polices](http://www.pharmacyboard.gov.au/Codes-Guidelines.aspx) page on the Board’s website.

Royal Commission

The Board and AHPRA have been following the Royal Commission into institutional responses to child sex abuse and its implications for the regulation of health practitioners. The issues raised in the Royal Commission are serious and disturbing.

The Board and AHPRA are committed to learning from the evidence before the Royal Commission and its findings and are taking action to make sure our regulatory system is responsive to anyone who has been sexually abused by a registered health practitioner, who comes forward.

If you have a concern about a health practitioner call:

* AHPRA on 1300 419 495
* NSW – 1800 043 159
* Qld – 133 646 (133 OHO).

Stephen Marty

Chair, Pharmacy Board of Australia

10 June 2015

[*The Pharmacy Board of Australia*](http://www.pharmacyboard.gov.au/) *is the regulator of pharmacists in Australia and acts to protect the public by ensuring that suitably qualified and competent pharmacists are registered. The Board is responsible for developing registration standards, codes and guidelines for pharmacists and managing notifications (complaints)\* about pharmacists and pharmacy students. The Board does this through its powers under the Health Practitioner Regulation National Law, as in force in each state and territory, and the National Registration and Accreditation Scheme, supported by the Australian Health Practitioner Regulation Agency (AHPRA). The Board’s work in regulating Australia’s pharmacists in the public interest is underpinned by* [*regulatory principles*](http://www.ahpra.gov.au/About-AHPRA/What-We-Do.aspx)*, which encourage a responsive, risk-based approach to regulation.*

*\*Except in NSW and QLD which have co-regulatory arrangements.*