

Contents

Chair's message	1
News from the Board	1
Guidance on compounding of sterile injectable medicines published	1
Pharmacy regulators and stakeholders diagram	1
Webinar for final-year students	2
Online graduate applications for provisional registration open soon	2
Board sets registration fee for 2017/18	2
Registration renewal: Updating the national register	2
New registration data released	3
Practice advice	3

<i>Pharmacist CPD and the revised competency standards</i>	3
<i>Rescheduling of codeine</i>	3
<i>Pharmacists' obligations when using social media</i>	3
National Scheme news	4
COAG Health Council meeting communiqué	4
Legislative changes passed to establish a new National Board for paramedicine and provide stronger protection for the public	4
Co-Chairs announced to help lead the way for the first ever National Scheme Aboriginal and Torres Strait Islander Health Strategy	5
National Boards approve policy for removing reprimands from the national register	5
Keep in touch with the Board	6

Chair's message

Welcome to the Pharmacy Board of Australia's latest newsletter. In this edition we provide an update on a number of important Board and National Scheme¹ matters, including several recent publications by the Board.

I would like to draw your attention to a new Board diagram titled *Pharmacy regulators and stakeholders* which highlights the functions of the Board and other regulators within the complex pharmacy regulatory landscape. I hope that you find the diagram useful.

In this newsletter we also provide an update to pharmacists on the Board's expectations in regards to continuing professional development (CPD) planning following the recent publication of the *National competency standards framework for pharmacists in Australia 2016*.

The Board would like to thank the pharmacists who attended our meet and greet event held in Sydney on Thursday 21 September 2017, which coincided with the September Board meeting the following day. More than 60 registered pharmacists, students and other stakeholders from Sydney attended the event where the Board discussed a range of issues and questions raised by attendees. Board members enjoyed the opportunity to discuss first hand, topics such as the intern and preceptor experience, the upcoming codeine rescheduling and electronic prescribing and dispensing.

Lastly, the Board recently acknowledged pharmacists on World Pharmacists' Day on 25 September 2017. I would like to sincerely thank

on behalf of the Board all pharmacists for their varied contributions to the health of the Australian community. The theme for this year's commemorative day was 'From research to healthcare: Your pharmacist is at your service'. Whether it be in providing direct patient healthcare, or in other non-direct roles such as research and evaluation, or in the education of our future pharmacists, your contributions are important and recognised. Read the Board's [World Pharmacists' Day statement](#) on our website.

William Kelly
Chair, Pharmacy Board of Australia

News from the Board

Guidance on compounding of sterile injectable medicines published

The Board has published [guidance](#) titled *Compounding of sterile injectable medicines* to replace the currently postponed section 'Expiry of compounded parenteral medicines' of its *Guidelines on compounding of medicines*. The revised guidance will come into effect on 1 February 2018.

The supporting frequently asked questions on the compounding of medicines have also been updated, with additional information about compounding injectable medicines to help pharmacists apply the revised guidance in their practice.

The Board has advised all pharmacists of the publication which was the topic of its 1 August 2017 [news item](#).

Pharmacy regulators and stakeholders diagram

The Board has published on its [Other regulators](#) webpage a diagram of the different pharmacy regulators and stakeholders in Australia.

¹ National Registration and Accreditation Scheme (the National Scheme)

This diagram illustrates the Board's role in the regulation of pharmacists, interns and students under the National Scheme. It also shows a number of other pharmacy regulators and stakeholders, and how they relate to pharmacists, interns, students and pharmacy premises. A short summary of the functions and/or responsibilities of the different entities is also provided which clarifies the functions of the Board and the functions of other regulators.

Webinar for final-year students

The Board has published a [recording](#) of its webinar presentation for final-year students, *From pharmacy student to intern pharmacist*, which was held on 6 September 2017. Final-year students that were unable to take part in the 6 September 2017 webinar are urged to watch the recording which provides information on the Board's internship requirements including applying for provisional registration and having the supervised practice arrangements approved by the Board before starting supervised practice. The Board's [FAQ for pharmacy interns and preceptors](#) was also updated to include new questions from the webinar.

Online graduate applications for provisional registration open soon

AHPRA² will soon be calling for final-year pharmacy students to apply for registration online.

Pharmacy students on the Student Register who will complete their [approved program of study](#) by the end of 2017 will be sent an email inviting them to [apply online](#) for provisional registration four to six weeks before finishing their course and after Monday 9 October. We are updating our online application form to help make registration easier for students applying for registration, so if they can, students are asked to wait to apply until after Monday 9 October.

Students are encouraged to read the information on AHPRA's website under [Graduate applications](#). Certain applicants will also need to apply for an [international criminal history check](#).

The Board's video for graduates on our [Internships](#) webpage explains what they need to do to be granted provisional registration and what they need to do to stay registered, including the ongoing obligations of a registered pharmacist.

Once provisional registration is obtained, a registrant (intern) must meet the Board's [registration standards](#). The *Registration standard: Supervised practice arrangements* also outlines that interns must have their supervised practice approved by the Board before they start their supervised practice. Interns can start supervised practice as soon as their name and their supervised practice details are published on the [national register](#).

Board sets registration fee for 2017/18

Last month the Board announced that the general registration fee has been set at \$336, limiting the increase to indexation. It applies from 15 September 2017 and covers the registration

period for most pharmacists of 1 December 2017 to 30 November 2018.

A [full fee schedule](#) is published on the Board's website.

The National Scheme is funded by health practitioners' registration fees and there is no cross-subsidisation between professions. The decision to increase the fee by indexation ensures pharmacists are not unduly burdened, but still provides sufficient income to allow the Board to carry out its duties to protect the public.

More detailed information about the Board's financial operations are outlined in the health profession agreement between the Board and AHPRA for 2016/20, which is published on the Board's [website](#). This agreement sets out the partnership between the Board and AHPRA, and the services AHPRA will provide to support the Board to regulate pharmacists.

Registration renewal: Updating the national register

Registration renewal for pharmacists will open soon and we want to let you know that this year it will include an extra step.

When completing your renewal, you will be asked to check that your qualification(s) are recorded correctly on the online [national register of practitioners](#).

We are including this as part of online renewal to make it easy for you to confirm and update these details if required. You will be helping us to maintain the integrity of the national register, which helps to protect the public.

The national register keeps the public safe in the knowledge that its health practitioners are registered and qualified. Under the National Law³, the national register should include details of any qualification relied on by you to obtain registration.

Pharmacists with general or non-practising registration are due to renew online by 30 November 2017. Pharmacists who need to renew their provisional or limited registration are managed separately from the annual renewal of registration process, as the end registration dates differ for those registrants.

Under the National Law, registered health practitioners are responsible for renewing their registration on time each year. Applications for renewal received in December will incur a late fee.

Look out for an email from AHPRA soon inviting you to [renew online](#). The email reminders include a helpful information box with links to the [password reset function](#) and to a [video](#) explaining the online renewal process.

By law, all practitioners who apply to renew on time are able to practise while their annual renewal application is being processed. If you apply to renew on time or during the late renewal period, you can still practise even if:

- we are still processing your application to renew, and/or
- the registration expiry date displayed on the register has passed.

² The Australian Health Practitioner Regulation Agency (AHPRA)

³ The Health Practitioner Regulation National Law, as in force in each state and territory (the National Law)

If your name appears on the national register, this confirms that you are registered even if the registration expiry date displayed has passed.

A practitioner who **does not apply** to renew their registration by the end of the late renewal period must be removed from the Register of Pharmacists. Their registration will lapse and they will not be able to practise pharmacy in Australia. A 'fast-track' application can be made, but the pharmacist cannot practise until it is processed and the national register is updated, which can take time.

Further information

Useful information for pharmacists is on the Board's website:

- [Registration standards](#)
- [Registration renewal](#)
- [Renewal FAQ](#)

New registration data released

The Board has released its quarterly registration data. Read the latest report and other statistics on its [website](#). The data profiles Australia's pharmacy workforce, including information on types of registration held, principal place of practice, registrant age and gender.

At 30 June 2017, there were a total of 30,360 registered pharmacists comprising the following number of registrants according to registration type:

- 27,544 – general registration
- 1,709 – provisional registration
- 10 – limited registration, and
- 1,097 – non-practising registration.

Practice advice

Pharmacist CPD and the revised competency standards

With publication of the revised [National competency standards framework for pharmacists in Australia 2016](#) in May 2017, the Board confirms that for the new continuing professional development (CPD) period starting 1 October 2017, pharmacists can elect to plan their CPD according to either the 2010 standards, or to the revised (2016) standards.

The Board has funded the development of practice support tools for implementation of the revised framework, which will help pharmacists in working through the standards in the future, including in relation to planning their CPD. The Pharmacy Practitioner Development Committee (PPDC) is currently overseeing this work and information will be published upon release of the tools.

The Board encourages pharmacists to use the planning tools developed by pharmacy member organisations or the tools published on the Board's [website](#).

In identifying competencies relevant to their role and the services provided as part of the CPD planning process,

pharmacists are reminded of the universal domains in the 2010 and 2016 standards which apply to all pharmacists. These include:

- Domain 1, titled *Professional and ethical practice* in the 2010 standards (*Professionalism and ethics* in the 2016 standards), and
- Domain 2, titled *Communication, collaboration and self-management* in the 2010 standards (*Communication and collaboration* in the 2016 standards).

Pharmacists who are planning their CPD according to the 2016 standards should also note that standards 4.1 *Show leadership of self* and 4.2 *Manage professional contribution* in the revised standards also apply universally to all pharmacists.

The Board will publish further updates to pharmacists on the transition to the 2016 standards and the availability of the practice support tools for implementation of the revised framework in the coming months.

Rescheduling of codeine

Ahead of the codeine rescheduling to Schedule 4 which is to take place on 1 February 2018, the Board encourages pharmacists to use the training materials and other resources being developed by the pharmacy professional associations and other organisations, which will help pharmacists in adequately supporting their patients through this change, including with any issues that may arise. The Board also highlights the launch of the Therapeutic Goods Administration (TGA) [Codeine information hub](#) which includes information for pharmacists on talking to their patients about codeine.

Pharmacists' obligations when using social media

Pharmacists who use social media need to remember that their professional obligations continue when they are active online.

The Board's *Social media policy* and *Code of conduct for pharmacists* both apply to all digital activity, including public forums and in closed groups.

The *Social media policy* provides guidance on pharmacists' responsibilities and obligations when using and communicating on social media. Anyone using social media to advertise a regulated health service needs to meet the advertising requirements of the National Law. This includes removing any testimonials from a pharmacist's social media page.

The *Code of conduct for pharmacists* sets out the required standards of professional behaviour, which apply to interactions in person and online.

Some of the principles that are useful to remember when active online include:

- maintain professional standards and be aware of the implications of your actions, as in all professional circumstances

- be aware of your ethical and regulatory responsibilities when you are interacting online – they are the same as when you interact in person
- ensure that you protect the privacy and confidentiality of patient information, and
- comply with the advertising provisions in the National Law and with the Board's advertising guidelines.

The [Social media policy](#), [Code of conduct for pharmacists](#) and [advertising guidelines](#) are available on the Board's website.

National Scheme news

COAG Health Council meeting communiqué

The federal and state and territory health ministers met in Brisbane on 4 August 2017 at the [COAG Health Council](#) to discuss a range of national health issues. The meeting was chaired by the Victorian Minister for Health, the Hon. Jill Hennessy. AHPRA CEO Martin Fletcher attended the Australian Health Workforce Ministerial Council (the Ministerial Council) meeting which brings together all health ministers throughout Australia to provide oversight for the work of the National Scheme. AHPRA and the National Boards provide a regular update to the Ministerial Council on our work.

The meeting included an agreement by health ministers to proceed with amendments to the National Law to strengthen penalties for offences committed by people who hold themselves out to be a registered health practitioner, including those who use reserved professional titles or carry out restricted practices when not registered. Ministers also agreed to proceed with an amendment to introduce a custodial sentence with a maximum term of up to three years for these offences.

These important reforms will be fast tracked to strengthen public protection under the National Law. Preparation will now begin on a draft amendment bill, with a view to being introduced to the Queensland Parliament in 2018.

Ministers also discussed mandatory reporting provisions for treating health practitioners, agreeing that protecting the public from harm is of paramount importance as is supporting practitioners to seek help and treatment for their health concerns, including for their mental health and wellbeing.

It was agreed that the Australian Health Ministers' Advisory Council will recommend a nationally consistent approach to mandatory reporting exemptions for treating practitioners following a consultation process with consumer and practitioner groups. A proposal on mandatory reporting is expected to be considered at the November 2017 meeting of the COAG Health Council.

The Council produces a communiqué from its meeting which can be accessed on [AHPRA's website](#).

Legislative changes passed to establish a new National Board for paramedicine and provide stronger protection for the public

The *Health Practitioner Regulation National Law and Other Legislation Amendment Bill 2017* has been passed by the Queensland Parliament and has received royal assent. The Bill contains amendments to the National Law that will apply in all states and territories except Western Australia (South Australia also needs to make a regulation to give effect to the amendments). The Legislative Assembly of the Parliament of Western Australia has also passed a corresponding amendment Bill (the Health Practitioner Regulation National Law (WA) Amendment Bill 2017) which will now be considered by the Legislative Council.

The passing of the Bill in Queensland marks a significant day for health practitioner regulation as these are the first legislative amendments to the National Law since the start of the National Scheme in 2010. The changes to the National Law will enable the Paramedicine Board of Australia to be established with the appointment of inaugural board members by health ministers in the near future. Also, new measures that strengthen public protection will be introduced and there will be formal recognition of nursing and midwifery as two separate professions regulated by the Nursing and Midwifery Board of Australia (NMBA).

The amendments include:

- **Introduction of national regulation of paramedics:** This will mean the establishment of the Paramedicine Board of Australia, with national registration of paramedics expected to begin in the second half of 2018.
- **Recognising nursing and midwifery as separate professions:** The National Law will be updated to recognise the two professions as separate. There is no plan to change the structure of the NMBA or for how nurses and midwives will interact with the Board.
- **Changes to strengthen the management of complaints (notifications) and disciplinary enforcement powers of AHPRA and National Boards, including:**
 - a. **Provision of practice information:** A National Board may require a health practitioner to provide details of their practice arrangements, regardless of how they are engaged to practise. This will mean health practitioners that practise in multiple locations or under different employment; contractual or voluntary arrangements will be required under law to provide this information to their National Board when asked to do so.
 - b. **Public interest grounds for immediate action:** Broadening the grounds by which a National Board may take immediate action against a health practitioner or student if it reasonably believes it is in the public interest.
 - c. **Extension of prohibition order powers:** A responsible tribunal may issue a prohibition order to prohibit a person from providing any type of health service

or using any protected or specified title. A breach of a prohibition order in any state or territory will also become an offence with a maximum penalty of \$30,000.

- d. **Communication with notifiers:** This change will improve communication for people who make a complaint or report concern to AHPRA and National Boards (notifiers) about a registered health practitioner's health, performance or conduct. National Boards will now have the discretion to inform notifiers of a greater range of actions taken by the National Board in response to their complaint or concern and the reasons for their actions.
- **Additional powers for the COAG Health Council (formerly operating as the Australian Health Workforce Ministerial Council) to change the structure of National Boards:** This means that health ministers may make changes to the structure and composition of the National Boards by regulation following consultation. There are no current proposals to change the structure of National Boards.

Decisions about proposed amendments to the National Law are made by health ministers and the governments of all states and territories, with the changes progressed through the Queensland Parliament (as the host jurisdiction of the National Law), and the Western Australian Parliament.

AHPRA will work with National Boards, governments, health departments, professions and consumer representatives to support the implementation of the changes to the National Law into daily operations. While the Queensland Bill has received royal assent, many of the changes to the National Law are likely to occur in a staggered process over the coming months.

The *Health Practitioner Regulation and National Law and Other Legislation Amendment Act 2017* as passed by the Queensland Parliament can be accessed on the Queensland Government [website](#). More information on the regulation of paramedics under the National Scheme is available on the AHPRA [website](#).

Co-Chairs announced to help lead the way for the first ever National Scheme Aboriginal and Torres Strait Islander Health Strategy

The National Scheme is pleased to announce the appointment of co-Chairs for the Aboriginal and Torres Strait Islander Health Strategy group.

Associate Professor Gregory Phillips, CEO of ABSTARR Consulting, and Dr Joanna Flynn AM, Chair of the Medical Board of Australia, have been appointed as co-Chairs of the group.

The strategy group has been brought together to develop the National Scheme's first ever Aboriginal and Torres Strait Islander Health Strategy.

AHPRA, the 14 National Boards responsible for regulating the health professions, accreditation authorities and

Aboriginal and Torres Strait Islander health sector leaders and organisations have committed to an Aboriginal and Torres Strait Islander Health Strategy with the vision of: *Patient safety for Aboriginal and Torres Strait Islander peoples in Australia's health system is the norm, as defined by Aboriginal and Torres Strait Islander peoples.*

Associate Professor Gregory Phillips was nominated by Aboriginal and Torres Strait Islander health sector leaders and organisations to be co-Chair. Gregory Phillips is from the Waanyi and Jaru peoples, and comes from Cloncurry and Mount Isa in North-West Queensland. Dr Joanna Flynn was nominated by leaders of the National Scheme to be co-Chair.

Associate Professor Gregory Phillips and Dr Flynn agree that partnerships are fundamental in this work.

'With more than 700,000 Australians registered by the National Boards and a commitment from Aboriginal and Torres Strait Islander Leaders and the National Scheme to work collaboratively there is a unique opportunity for real change to the health outcomes of all Australians,' Associate Professor Phillips said.

'We are grateful for the strong relationships we have with our partners in this work, particularly the expert guidance we have received from Aboriginal and Torres Strait Islander health sector leaders. This work cannot be done with National Boards acting in isolation and I am looking forward to making this new strategy a reality through my role as co-Chair,' Dr Flynn said.

Further information

The Aboriginal and Torres Strait Islander Health Strategy group publish communiqués of its work. These are available on the [Advisory group page](#) of the AHPRA website.

The next meeting of the strategy group will be held in November 2017.

National Boards approve policy for removing reprimands from the national register

A policy to ensure consistent removal of reprimands from the national register of practitioners has been approved by all National Boards.

Reprimands on a practitioner's registration can be imposed under the National Law by a performance or professional standards panel, professional standards committee (New South Wales), and a relevant tribunal or court.

The policy will ensure that reprimands are removed from the [national register](#) in a consistent and effective way. It also allows for the removal of reprimands imposed under previous legislation to be considered on an individual basis, consistent with removal powers under that legislation.

A reprimand imposed under the National Law will be removed from the national register on the publication end date set by the relevant panel, committee, court or tribunal. Where a panel or tribunal has not set a publication end date, or where the reprimand was imposed under previous legislation, the reprimand will be removed no earlier than five years from the date of initial publication.

This is subject to:

- the practitioner making an application for removal of the reprimand
- no relevant event having occurred in the five-year period of publication of the reprimand, and
- legal advice confirming the power to remove a reprimand imposed under previous legislation.

A relevant event is any health, performance or conduct notification, action taken against the practitioner relating to an adverse disclosure on renewal of registration, new information returned on a criminal history check or a confirmed breach of restrictions. It also includes when action has been taken against a practitioner about their conduct, health or performance. New notifications, irrespective of whether action was taken, will also be taken into account if an application for removal of a reprimand is received after the five-year period of publication.

The policy will take effect from 2 October 2017 and will be reviewed annually. An application form for removal of a reprimand from the national register will be published under [Common forms](#) on the AHPRA website.

Keep in touch with the Board

- Visit the [Pharmacy Board website](#) for the mandatory registration standards, codes, guidelines and FAQ. Visiting the website regularly is the best way to stay in touch with news and updates from the Board.
- Lodge an [online enquiry form](#).
- For registration enquiries, call 1300 419 495 (from within Australia) or +61 3 9275 9009 (for overseas callers).
- To update your contact details for important registration renewal emails and other Board updates, go to the AHPRA website: [Update contact details](#).
- Address mail correspondence to: William Kelly, Chair, Pharmacy Board of Australia, GPO Box 9958, Melbourne, VIC 3001.

