AHPRA

Review of stakeholder perceptions of AHPRA and the National Boards

A Social Research Project

November 2018

Supplementary report prepared for:

The Pharmacy Board of Australia





Introduction

- Truly Deeply has been engaged by the Australian Health Practitioner Agency (AHPRA) to test the
 perception of sentiment towards AHPRA and the National Boards. This review is intended to help AHPRA
 and National Boards better understand what stakeholders think and feel about the organisation and to
 identify how to facilitate ongoing confidence and trust in the work performed by AHPRA and National
 Boards.
- The study has used a combination of both qualitative and quantitative approaches, specifically extended interviews (face to face and via the telephone), focus groups and online surveys.
- A single, integrated report has been provided to AHPRA documenting the key themes and results.
- A separate summary has been provided for each of the National Boards based on the results of the online survey with practitioners.
- The purpose of this report is to present a subset of findings specifically for the Pharmacy Board of Australia.

An overview of the methodology

A **four stage** approach that combined both qualitative and quantitative research approaches has been used.

Stage 1 comprised a total of 53 qualitative interviews. This consisted of interviews with the Chair of every National Board (15); the Executive Officer of almost every National Board (13), Government health providers (3); major health employers (3); Aboriginal and Torres Strait Islander Health Strategy group representatives (5); Co-regulatory partners (4); Professions Reference Group members (3); representatives from CALD communities (2) and 'Other' various stakeholders (5).

These interviews were conducted between August 10 and September 26, 2018.

Stage 2 involved three focus groups. The three groups were conducted with i) Members of the Community Reference Group; ii) Members of the Professions Reference Group and iii) Accreditation Authority representatives.

These groups were conducted between August 14 - 22, 2018.

Stage 3 consisted of an online survey with practitioners from all 15 registered professions.

This survey was conducted between September 17 - 25, 2018.

Stage 4 consisted of an online survey with a representative sample of the Australian general public.

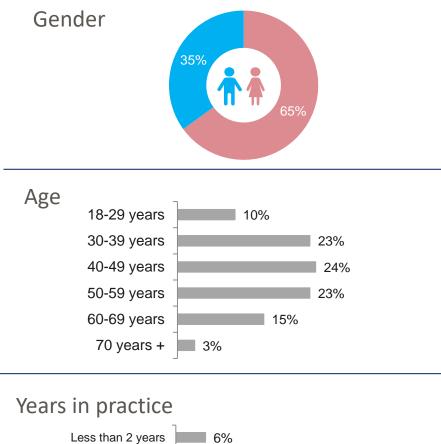
This survey was conducted between September 17 - 25, 2018.

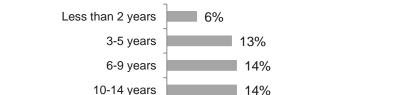
Quantitative approach

- Online surveys were conducted with practitioners as well as the broader community following the qualitative investigation. Truly Deeply developed the questionnaires in consultation with AHPRA.
- The questionnaires were developed to allow initial findings in the qualitative to be further explored and validated.
 Additional pre-codes and lists of words and statements were included in the survey following feedback from interviews and discussion with stakeholders.
- Respondents to the Community Survey were sourced using an external panel provider.
- Participants in the Practitioner Survey were sourced by AHPRA (using software that allowed the survey to be deployed to a random sample of practitioners in each profession).
- The practitioner sample has been weighted to ensure an equal 'voice' within the total sample of registered health practitioners (with the sample of 'nurses' and 'midwives' further separated). This has been to done to ensure that the views of (for example) of 'psychologists', which accounted for 14% of responses to the survey, does not distort the views of other professions, which accounted for a much smaller response overall to the survey.
- Once the surveys were closed, statistical analysis was conducted by Truly Deeply to summarise and compare the quantitative findings.

	Community Survey	Practitioner Survey
Fieldwork dates	September 19 - 25	September 19 - 27
Responses	1,020	5,694
Email invitations sent	na	100,257
Response rate	na	6.0%

Sample of registered practitioners (n = 5,694)

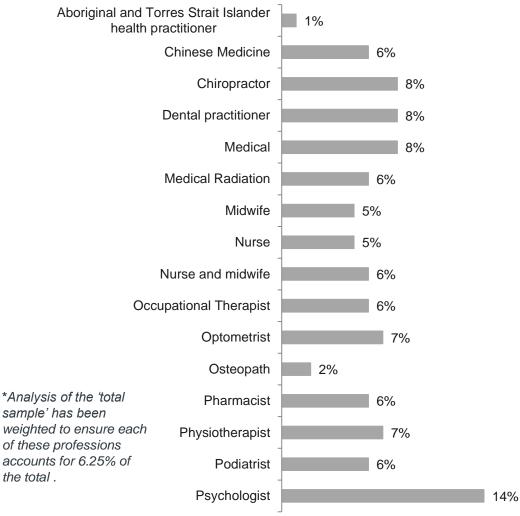




11%

42%

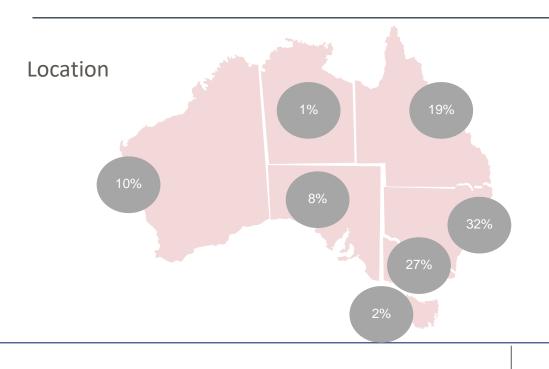
Practitioner type*



15-19 years

20 years or more

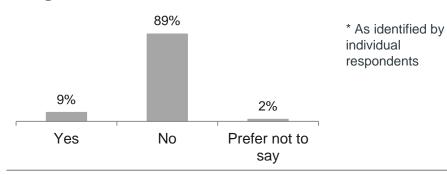
Sample of registered practitioners (n = 5,694)



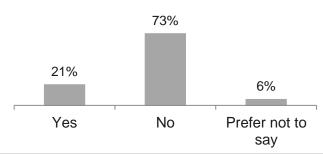
Metro: 66%

Regional: 34%

% who have had a complaint ever made against them to AHPRA or their Board as a registered Health Practitioner*



% who have ever been audited to check their compliance with the mandatory registration standards*



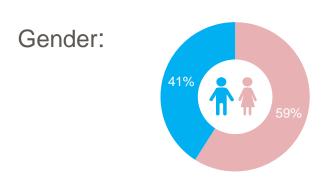
* As identified by individual respondents

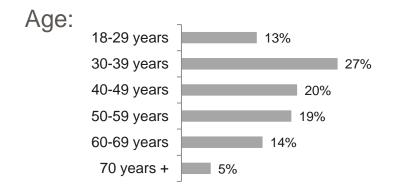
Summary of results of the online survey with registered health practitioners.

Specific insights into the responses from: pharmacists

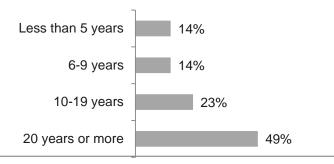


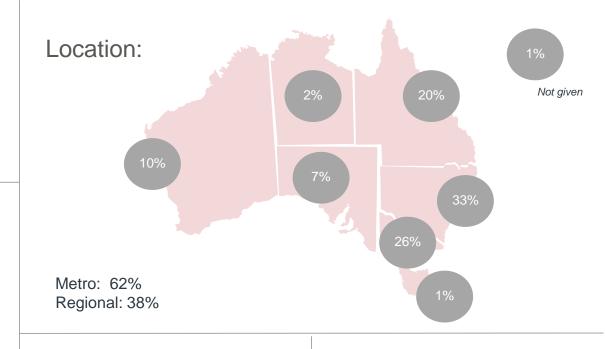
Sample of pharmacists (n=355)



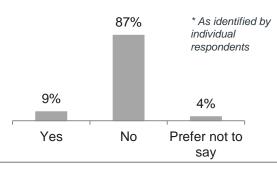


Years in practice:

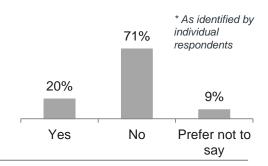




% who have had a complaint ever made against them to AHPRA or their Board as a registered Health Practitioner*



% who have ever been audited to check their compliance with the mandatory registration standards*



Perceptions of the Pharmacy Board of Australia (Top 20 associations)

Q. Which of the following words or statements, if any, do you strongly associate with the (National Board)? Base: Total sample of practitioners registered with this specific Board (n=355)

Perception	% of practitioners with that perception of the Board	Difference compared to the average across all professions
Regulators	45%	(+7%)
Necessary	37%	(+2%)
Administrators	35%	(0%)
For practitioners	31%	(-5%)
Bureaucratic	29%	(+3%)
Decision-makers	25%	(-2%)
For the public	24%	(+1%)
Trustworthy	17%	(+4%)
Controlling	16%	(+6%)
Out of touch	15%	(+3%)

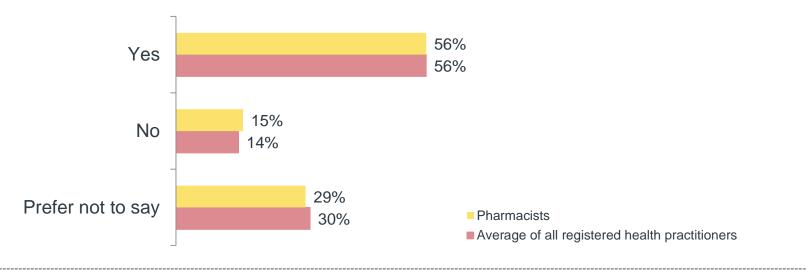
Perception	% of practitioners with that perception of the Board	Difference compared to the average across all professions
Rigid	15%	(+4%)
Competent	14%	(-4%)
Intimidating	12%	(+2%)
Fair	12%	(+1%)
Advocates	11%	(-7%)
Shows leadership	10%	(-3%)
Poor communicators	10%	(0%)
Supportive	10%	(-3%)
Aloof	10%	(+3%)
Supportive	10%	(-3%)

Green indicates a result *significantly higher* than the average across all professions. **Orange** indicates a result *significantly lower* than the average across all professions.

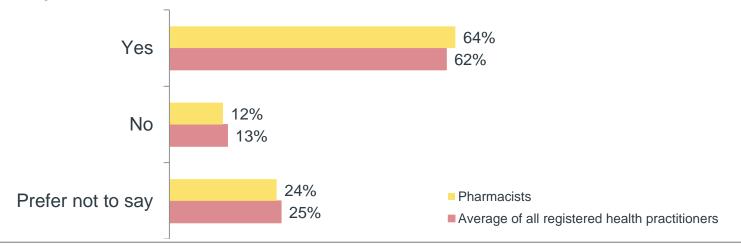


Levels of confidence and trust in the Pharmacy Board of Australia

Q. Do you feel confident that your National Board is doing everything it can to keep the public safe?



Q. Do you trust your National Board?



What are the indicators of trust and barriers to trust in the Pharmacy Board of Australia

Indicators of trust: 64% trust the Board

They are currently the only association I trust to action relevant issues without hidden agenda.

I believe they are doing the right thing and doing the job they are supposed to do.

Good reputation, never heard any complaints from other practitioners.

Registered and well managed organisation with good intentions.

They are fair in their investigation of reports of misconduct. They are there to protect the public and those practitioners who are doing the right thing.

Staffed by people with high professional standards and values.

Has been a body representing pharmacists for a long time, and I have no knowledge of their actions been unjust or unfair to any pharmacist where the pharmacist has endeavoured to do the right thing.

Transparent processes, responsive to complaints but fair.

Barriers to trust: 12% DO NOT trust the Board

Have allowed Chemist Warehouse and other businesses to destroy the pharmacy profession.

Nepotism, bias, self interest, lack of objectivity, does not follow through on breaches by rich and more powerful pharmacists, just follows up on vulnerable pharmacists looking for work or improve their position.

Not supportive of sole pharmacy businesses. Pharmacy has become an unsatisfactory career for a lot of graduates thanks to chemist warehouse and big pharmacy wholesalers. Working condition and pay is getting only worse with time. Pharmacy career is hard work and effort, but not satisfactory return at the end of the day.

I have the impression that they don't help practitioners develop their skills and take the side of the public, even for trivial matters.

They are irrelevant and pointless. Do we really need two bodies to regulate pharmacy?

They work more for themselves rather than for the profession.

Members of board out of touch with reality.

Non communicative, secret, not representative.

Full list of responses provided separately

Perceptions of AHPRA amongst pharmacists

(Top 20 associations)

Q. Which of the following words or statements, if any, do you strongly associate with AHPRA? Base: Total sample of practitioners registered with this specific Board (n=355)

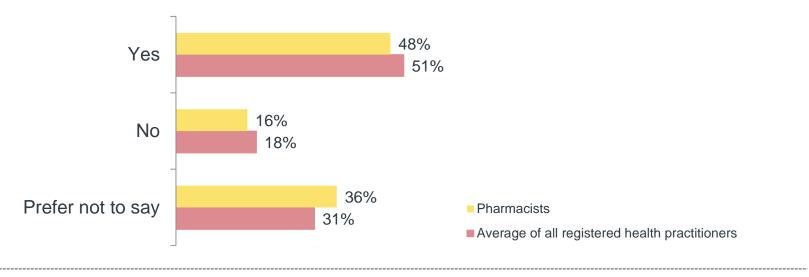
Perception	% of practitioners with that perception of AHPRA	Difference compared to the average across all professions
Administrators	54%	(+2%)
Regulators	52%	(-2%)
Necessary	41%	(+1%)
Bureaucratic	39%	(-1%)
For the public	33%	(-5%)
For practitioners	31%	(+1%)
Decision makers	18%	(-7%)
Rigid	18%	(0%)
Poor communicators	17%	(+3%)
Controlling	15%	(-2%)

Perception	% of practitioners with that perception of AHPRA	Difference compared to the average across all professions
Out of touch	13%	(+1%)
Intimidating	13%	(-4%)
Secretive	13%	(+5%)
Aloof	10%	(+2%)
Competent	10%	(-5%)
Accessible	8%	(-5%)
Fair	8%	(-2%)
Trustworthy	8%	(-1%)
Accessible	8%	(-5%)
Trustworthy	8%	(-1%)

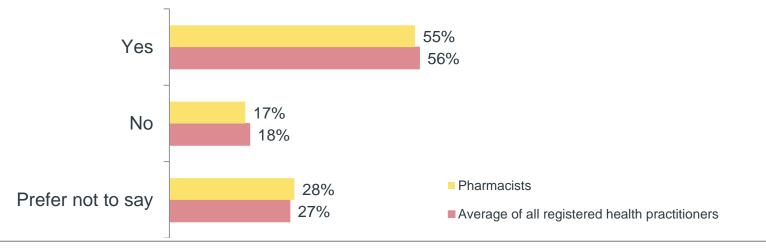
Green indicates a result *significantly higher* than the average across all professions. **Orange** indicates a result *significantly lower* than the average across all professions.

Levels of confidence and trust in AHPRA amongst pharmacists

Q. Do you feel confident that **AHPRA** is doing everything it can to keep the public safe?



Q. Do you trust AHPRA?



What are the indicators of trust and barriers to trust in AHPRA amongst pharmacists

Indicators of trust: 55% trust AHPRA

They are currently the only regulators for health care practitioner registrations.

Very professional body.

They keep things honest and simple.

I believe our interests are foremost.

I believe they are fulfilling their function in registration of health care professionals.

Seem fair and balanced.

Good communication especially through regular newsletters.

They seem to be reasonably well organised, considering the tasks they have to do, and honest.

Appears to be transparent, not aware of any major negative incidents.

They adhere to legal requirements, communications are aimed for the safety of the public. They seem to be fair in their approach And they seem to keep in touch through regular communications.

Barriers to trust: 17% DO NOT trust AHPRA

They are a faceless bunch of bureaucrats who are only interesting in self-aggrandisement. They haven't been in touch with the real world for years, the Boards are the bodies that should be in control of the whole process. Abolish the AHPRA and get the BOARDS to do the work.

Slow processes, delays in responding to situations.

They are money hungry. What is it exactly that my annual fees do? Nothing for me that's for sure!!!

I think they are out of touch with current challenges that practitioners face and give poor advice to practitioners.

They operate a system of health practitioner being guilty until proven innocent instead of the other way around.

They are inconsistent and in some cases ignorant.

Bureaucratic and arrogant.

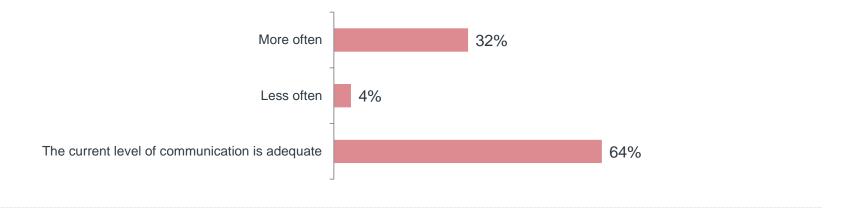
Limited visibility over what they do, yet charge more and more each year.

Not transparent, secretive.

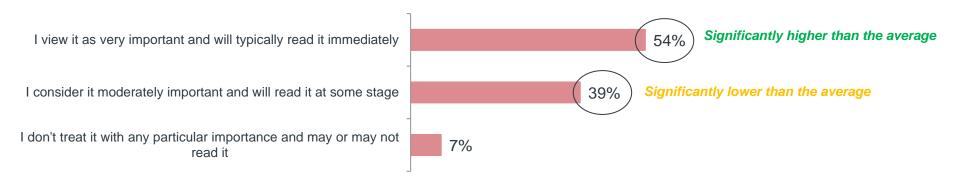
Full list of responses provided separately

Response to communication by the Pharmacy Board of Australia

Q. Would you like (National Board) to communicate with you....?



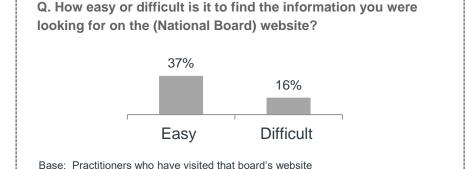
Q. How do you typically respond to communication you receive from (National Board)?

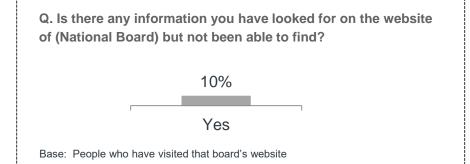


Base: Total sample of practitioners registered with this specific Board (n=355)

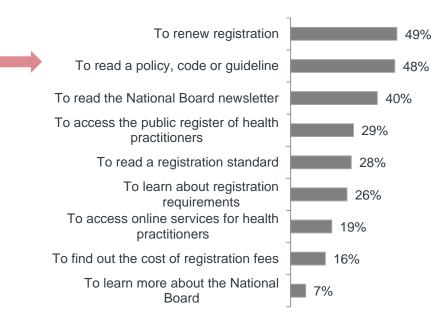
Use of the Pharmacy Board of Australia website







Reasons for visiting the National Board website



Additional information sought by practitioners include (but not limited to)...

- Full list of pharmacies and their private or non-profit owners
- · Background of Board members
- · Mandatory cautionary ancillary labels required for medicines
- Links to legislation
- CPD requirements
- What to do when changing owner structure of a pharmacy (from sole trader to company). Advice on pay rates and awards that apply



Additional feedback from pharmacists

Sample of open ended responses (full list of responses provided separately)

I don't clearly understand the differences between the two.

Unclear boundaries, highly Bureaucratic, question your quality of hiring practices, too legalistic and not focussed on quality improvements, not focussed on improving public outcomes but on finding practitioner fault, focussed on nepotism at state level at least.

I don't really know what the differences are. I don't know a huge amount of what they do, except write guidelines and manage registration.

Dominated by the same monopoly of men who are friends and guild member, all working with each other for their own benefit even though one of the member would be discriminating to an employee, it is ok because he pays big fees to the guild corporation and he is a PBA examiner. Sad industry.

Uncaring towards practitioners Mandatory reporting of health conditions leads to those suffering health conditions not seeking help from fear of losing their registration and livelihood This in turn leads to worsening of the underlying condition, self medication, other unhelpful coping mechanisms and likely has lead to countless preventable deaths/suicides.

Necessary bodies that seem to be doing a good job.

Just wish they were more timely, the amount of information about a practitioner available is concerning.

No, you both do a fantastic job in looking after us as well as the public. Thank you to both of you.

EXPENSIVE!!!!!

Be tougher on health professionals who are not acting professionally.

Time for radical change & transparency!

Simplification of fees or amalgamation with reduced fees would be beneficial.

The distinction between the roles and responsibilities of AHPRA and the National Pharmacy Board of Australia needs to be much clearer. On the surface it seems like a duplication in organisations/red tape.

It would be great to have updated acts and regulation or relevant useful resources on AHPRA website for each health practitioner.



More information

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