

11 November 2016

Mr Samuel Batty Coroner's Registrar Coroners Court of Victoria 65 Kavanagh Street SOUTHBANK VIC 3006

Email: team5@coronerscourt.vic.gov.au

Dear Mr Batty

Response to Investigation into the death of Melissa J May

I provide the following response to Coroner Rosemary Carlin's recommendations to the Pharmacy Board of Australia (the Board) arising from the investigation into the death or Melissa J May.

The Board noted the reference to the "Pharmaceutical Board of Australia" in the recommendations rather than the Pharmacy Board of Australia. As outlined in the Health Practitioner Regulation National Law, as in force in each state and territory (the National Law), the functions of the Board include:

- registering pharmacists and students
- developing standards, codes and guidelines for the pharmacy profession
- handling notifications, complaints, investigations and disciplinary hearings
- assessing overseas trained practitioners who wish to practise in Australia
- approving accreditation standards and accredited courses of study.

As a participant in the National Registration and Accreditation Scheme (the National Scheme), the Board works collaboratively and in the public's interest with the National Board of 13 other health professions and the Australian Health Practitioner Regulation Agency.

The Board reviewed the Coroner's recommendations and consulted with the Royal Australian College of General Practitioners (RACGP) and responses to the recommendations are provided below. The Board notes that a separate response will be provided by the RACGP on the Coroner's recommendations.

Recommendation 1

The Royal Australian College of General Practitioners and the Pharmaceutical Board of Australia collaboratively consider how they might incorporate the lessons of this case into future training and the design of future interventions to reduce pharmaceutical drug-related harms.

While the Board does not design and deliver training courses, it regularly communicates with pharmacists about practice issues and pharmacy stakeholders including those who deliver continuing professional development for pharmacists and develop practice standards for pharmacists.

The Board publishes quarterly newsletters for pharmacists on its website (www.pharmacyboard.gov.au/News/Newsletters.aspx) and sends an electronic copy to all registered pharmacists. The newsletter updates pharmacists about a range of matters relevant to the National Scheme and routinely includes advice on a range of practice issues and case study summaries which outline lessons to be learnt. These practice articles and case studies provide valuable information to pharmacists and act as a prompt to pharmacists to apply the information in practice. Examples of information for pharmacists that were published in the Board's October 2016 newsletter include:

- Applying the Board's code of conduct and guidelines in practice
- Bulk sale of scheduled medicines
- Expired medication
- Dispensing procedures and proprietor responsibilities.

In December 2015, the Board published an article in its newsletter to pharmacists regarding the RACGP guide on prescribing benzodiazepines which focuses on patient-centred care, accountable prescribing and harm reduction. The Board advised pharmacists how to access the guide given the potential value to their practice. The Board had previously made a submission to the RACGP consultation on resources for GPs on prescribing drugs of dependence and commits to providing feedback on any future consultations.

The Board also publishes monthly communiqués on its website (www.pharmacyboard.gov.au/News/Communiques.aspx), and distributes the communiqués to stakeholders including pharmacy media. Important issues included in communiqués that are relevant to pharmacists are regularly published on stakeholder and pharmacy media publications which also contributes to the dissemination of information to pharmacists and stakeholders.

The Coroner's findings regarding this case will be further reviewed for incorporation into future Board newsletter and communiqué articles to facilitate widespread awareness in the profession of the relevant issues including the importance of applying the Board's guidance in practice and inter-professional communication and collaboration.

The Board will consult with stakeholders including pharmacy professional organisations and providers of continuing professional development for pharmacists about the Coroner's findings. This will facilitate the development of future training for pharmacists and the design of future interventions to reduce pharmaceutical drug-related harms.

The Board has consulted with the RACGP about opportunities for the future publication of the lessons of this case and both parties will progress these individually in separate publications for the respective professions.

Recommendation 2

The Royal Australian College of General Practitioners and the Pharmaceutical Board of Australia collaboratively consider the need for the development of a joint guideline in relation to communication between the professions to ensure the safe prescribing and dispensing of drugs of dependence, including methods of implementing daily dispensing, avoiding early dispensing and the provision of prospective prescriptions.

Jurisdictional legislation outlines the obligations of authorised prescribers and requirements for writing prescriptions and the obligations of pharmacists and requirements for dispensing and supplying medicines to the public.

The broad range of guidance outlined in the Board's code of conduct and guidelines for pharmacists address the safe prescribing and dispensing of drugs of dependence, including methods of implementing daily dispensing. At the commencement of the National Scheme in 2010, the Board published the Code of conduct for pharmacists, Guidelines for dispensing of medicines and Guidelines on specialised supply arrangements. Summaries of these and other related guidelines for pharmacists are included in Attachment A.

The Board consulted with the RACGP about published profession-based practice standards, policies, codes and guidelines, how these publications address a range of issues relevant to this case and foster inter-professional collaboration to achieve patient-centred care and harm minimisation.

The Board and the RACGP assessed the need for a joint guideline and agreed that this was not required given the range of material published by each entity for each group of practitioners that address the range of issues outlined in this recommendation.

Both parties acknowledged the opportunities for additional communication and consultation on profession specific guidance and initiatives to improve practice in the public interest. These opportunities are additional to the proposals outlined in the response to recommendation 1 regarding communication of

important practice information to practitioners. Opportunities for communication, consultation and collaboration also exist for National Boards of health professions registered under the National Scheme.

If you require any further information wish to discuss this matter further, please do not hesitate to contact me on 0417 484 350 or e-mail on Bill.Kelly@ahpra.gov.au. Alternatively, you may contact the Board's Executive Officer, Mr Joe Brizzi on (03) 8708 9020 or e-mail on Joe.Brizzi@ahpra.gov.au.

Yours sincerely

William Kelly

Chair

Pharmacy Board of Australia code of conduct and guidelines

Attachment A

In accordance with s39 of the National Law, the Board may develop and approve codes and guidelines-

- (a) to provide guidance to the health practitioners it registers; and
- (b) about other matters relevant to the exercise of its functions.

In accordance with s40 of the National Law, the Board conducts wide-ranging consultation about the content of codes and guidelines before their publication. The Board invites feedback from the public, the profession, pharmacy stakeholders, government, partners in the National Scheme and other interested parties.

Section 41 of the National Law outlines that a code or guideline approved by the Board, is admissible in proceedings under the Law or a law of a co-regulatory jurisdiction against a pharmacist registered by the Board as evidence of what constitutes appropriate professional conduct or practice for the health profession.

At the commencement of the National Scheme in 2010, the Board developed and approved a code of conduct for pharmacists and a range of guidelines for pharmacists after wide-ranging consultation. Since then, the Board has conducted a review of the publications outlined below which are published on its website (www.pharmacyboard.gov.au/Codes-Guidelines.aspx). Retired versions of the code of conduct and guidelines for pharmacists are also published on the Board's website (www.pharmacyboard.gov.au/Codes-Guidelines/Retired-Codes-and-Guidelines.aspx).

Summaries of the current code of conduct and relevant guidelines are provided below.

The *Code of conduct for pharmacists* (March 2014) is based on a common code used by a number of National Boards. The code contains important standards for practitioner behaviour in relation to:

- providing good care, including shared decision-making
- working with patients or clients
- · working with other practitioners
- working within the healthcare system
- minimising risk
- maintaining professional performance
- professional behaviour and ethical conduct
- ensuring practitioner health
- teaching, supervising and assessing, and
- research.

The *Guidelines for dispensing of medicines* (September 2015) focus on safe dispensing and labelling of medicines and on providing a good pharmacy service.

The *Guidelines on dose administration aids and staged supply of dispensed medicines* (September 2015) (previously titled *Guidelines on specialised supply arrangements, 2010*) were developed in recognition of the increased demand for dose administration aids (DAAs) and, where used in association with them, automated dose packaging systems. Also addressed is advice on dealing with the supply of medicines to be issued periodically.

The *Guidelines for proprietor pharmacists* (September 2015) focus on the professional responsibilities of proprietor pharmacists that impact on the safe, effective delivery of services to the public.

The *Guidelines on practice-specific issues* (September 2015) address various pharmacy practice matters, including those which relate to specific services provided by some pharmacists or at some pharmacies. Particular reference is made to drugs of abuse. As patterns of drug abuse change over time, the content of these guidelines is expected to be revised as needed.

The Board's codes and guidelines outline that in addition to complying with its codes and guidelines, pharmacists are required to comply with all legislation relevant to the practice of pharmacy in the jurisdiction where the practice occurs, and must be aware of and comply with the profession's standards and guidelines as relevant to their scope of practice and type of registration.