Communiqué

27 September 2016

The Victorian Pharmacy Authority (the "Authority") met on 20 September 2016 at the Authority offices.

Victorian Pharmacy Authority Guidelines 2016

At its meeting on 20 September 2016, the Victorian Pharmacy Authority approved the text of the 2016 guidelines after having taken into account feedback received from stakeholders. The new edition is similar in content to the 2015 version. Additions refer to alterations to registered premises, local council planning permits and the need to keep pseudoephedrine products out of direct sight of the public. Clarification of dispensary area requirements is also included.

The Authority has updated its guideline on facilities for immunisation services, and included additional guidance to licensees and applicants on undue influence in commercial arrangements. The existing guideline on display and sale of Schedule 3 poisons containing codeine has been retained.

There are also editorial changes.

The revised guidelines become effective on 1 October 2016 and are available here.

Recent panel hearings

The Authority held two panel hearings in July and one panel hearing in August.

Case 1.

The proprietor was found to have failed to comply with the Act and/or there was a failure of good pharmaceutical practice at the registered premises in that there was or were:

- Failure to store Schedule 8 poisons in a Schedule 8 poisons safe;
- Failure to ensure that records of all transactions in Schedule 8 poisons showed the true and accurate balance of each Schedule 8 poison remaining in their possession after each transaction;
- Failure to provide sufficient pharmacist staff to meet the expected dispensing workload; and
- Failure to maintain adequate security alarm coverage of all areas where scheduled poisons are stored.

The proprietor was reprimanded and required to conduct a self-audit to be submitted to the Authority.

Case 2.

A pharmacy conducted by a company was found to have had numerous discrepancies in the Schedule 8 register and failed to have adequate arrangements in place to ensure the timely removal of expired S8 drugs.

The proprietor failed to ensure that the identity of medicines being supplied or dispensed cannot be known to other persons present in the premises.

There were inadequate filling records required for the assembly of dose administration aids.

Despite a previous inspection report having drawn attention to breaches of the cold chain, inadequate works of reference and displaying S3 codeine products contrary to the Guidelines, these had not been implemented.

The proprietor was reprimanded, required to conduct a self-audit to be submitted to the Authority and to produce evidence demonstrating that the above matters had been complied with.

Case 3.

The proprietor was found to have failed to comply with the Act in that they commenced to carry on a pharmacy business at a registered pharmacy premises prior to being granted a licence.

The proprietor was reprimanded and required to conduct a self-audit to be submitted to the Authority.

Toni Riley
Chair