

**SENATE FINANCE AND PUBLIC ADMINISTRATION REFERENCES COMMITTEE**

**INQUIRY INTO THE ADMINISTRATION OF HEALTH PRACTITIONER REGISTRATION  
BY THE AUSTRALIAN HEALTH PRACTITIONER REGULATION AGENCY (AHPRA)**

**CASE REPORTS**

**PURPOSE**

1. The Pharmaceutical Society of Australia (PSA) has made a submission to the Senate Finance and Public Administration References Committee's Inquiry into the administration of health practitioner registration by the Australian Health Practitioner Regulation Agency (AHPRA). PSA has also been invited to appear as a witness at a public hearing in Canberra on 4 May 2011.
2. To assist the Inquiry, PSA has prepared this additional document which outlines three examples of the experiences of PSA and its members. Names of individuals and, in some instances, locations have been de-identified.

**BACKGROUND**

3. PSA is the peak professional organisation representing Australia's 25,000 pharmacists working in all sectors and across all locations. PSA's core functions are: supporting pharmacists' commitment to high standards of patient care; providing continuing professional development, education and practice support to pharmacists in all sectors of professional practice; and representing pharmacists' role as frontline health professionals.
4. PSA is a voluntary membership-based organisation with a high proportion of its membership consisting of practising pharmacists. Intern pharmacists and pharmacy students are also members of the organisation.

**CASE REPORT 1: INTERN PHARMACIST AND FUTURE EMPLOYER**

5. This case report relates to an intern pharmacist, whose application to transition from provisional registration to general registration was delayed significantly, leading to an inability to work as a pharmacist which affected the person as well as the future employer.

<b>Date</b>	<b>Event</b>
19 June 2010	Intern Pharmacist, AB, accepted a position in a regional town (800 km away from family and friends) to commence employment as a Pharmacist on 12 July 2010 at Owner Pharmacist ST's community pharmacy.
30 June 2010 (Day 1)	AB completed requirements as an Intern Pharmacist and lodged relevant forms for general registration (ie. effectively to transfer from provisional registration) to AHPRA.
8 July 2010 (Day 9)	AB contacted AHPRA via the 1300 number to determine status of the application. Advised that no date could be provided for registration.
12 July 2010 (Day 13)	AB contacted the AHPRA office in the relevant State. The staff member was able to advise that one piece of documentation was in fact missing from AB's application.

13 July 2010 (Day 14)	The required document was supplied to AHPRA by fax and registered post.
14 July 2010 (Day 15)	An indication that AHPRA sent documents off for a police check.
20 July 2010 (Day 21)	AHPRA advised AB that documents had not been sent off for a police check and had sat awaiting collection by courier in the State AHPRA office until this day.
	AB regularly contacted AHPRA to check on progress. In many instances AHPRA was unable to provide any information and when they did, the information provided was variable or inaccurate. In one instance, AB was advised the registration process could take up to 90 days, however this advice had not been provided to AB or other provisional registrants prior to 1 July 2010.
30 July 2010 (Day 31)	No contact with AHPRA could be made for the previous two days as 1300 number went unanswered; apparently this was due to a problem with a telephone company. However, registration fee had been debited from AB's bank account.
	The future employer of AB (Owner Pharmacist, ST) maintained contact on a daily basis, even whilst overseas. ST also contacted the State AHPRA office as well as the State Branch office of PSA to seek information and resolution.
	ST subsequently employed AB as an Intern Pharmacist whilst waiting for a response from AHPRA. ST also reimbursed AB's relocation expenses and provided rental assistance.
4 August 2010 (Day 36)	AB received advice from AHPRA to confirm registration.
5 August 2010 (Day 37)	AB commenced employment with ST as a Pharmacist.

6. In this case, it took over five weeks before the Intern Pharmacist was able to confirm general registration with AHPRA and commence employment as a Pharmacist. This is in comparison to typical renewal timelines before commencement of national registration of between one day and two weeks. It should also be noted that the timeline in this case was most likely shortened due to the fortunate intervention of the State AHPRA office staff which was initiated through contacts by the future employer Pharmacist.

7. The Intern Pharmacist experienced extreme frustration, stress and anxiety, and was affected financially as the person was initially unable to work and was then employed as an intern. The Owner Pharmacist also faced uncertainties over an extended period regarding staffing, and was out of pocket in providing rental assistance in an effort to ease some of the financial burden on the future employee.

8. The timelines and events summarised above were typical of the experience of many more intern pharmacists (holding provisional registration) seeking to transfer to general registration. Similar experiences were also reported by pharmacists when renewing their general registration.

## CASE REPORT 2: PSA'S EXPERIENCE IN ASSISTING MEMBER PHARMACISTS

9. Since the commencement of national registration on 1 July 2010, PSA has received many enquiries from pharmacists who were unable to obtain information or assistance through AHPRA, mostly regarding their application for new registration, transition from provisional to general registration, or annual renewal of registration.

10. As the main point of contact of PSA members is usually through our state/territory Branches, we collected information from those entities regarding their experience and impact on staff.

Issue	Response
Number of pharmacists who contacted PSA Branches and type of information or assistance requested	<ul style="list-style-type: none"> <li>• In the initial months, PSA Branches typically answered 10–15 telephone calls per day from members who were unable to get through to AHPRA.</li> <li>• Support was provided to pharmacists by: emailing relevant AHPRA forms; providing guidance on information on the AHPRA web site and the online register; providing advice on mandatory registration requirements and procedure.</li> </ul>
Impact on PSA Branch staff	<ul style="list-style-type: none"> <li>• A large increase in workload at all levels.</li> <li>• Internal training of staff was required to ensure they could respond to queries correctly, efficiently and with confidence.</li> <li>• Staff also spent time navigating through AHPRA's web site and locating relevant forms and information.</li> </ul>
Contact of PSA Branch staff with AHPRA staff in their jurisdiction	<ul style="list-style-type: none"> <li>• Branch staff contacted AHPRA state offices on a number of occasions to seek clarification of issues.</li> <li>• Several instances required the PSA Branch Director to make direct contact with the Executive Officer or Members of the Pharmacy Board of Australia in order to resolve a significant issue.</li> </ul>
Reports of how pharmacists were affected	<ul style="list-style-type: none"> <li>• Many intern pharmacists were unable to commence work as a pharmacist.</li> <li>• This led to many employers unable to take planned holidays in January 2011.</li> <li>• Some employers also had to pay high fees to locum agencies in order to source locums at short notice.</li> <li>• Many employers agreed to employ the 'new' pharmacists as intern pharmacists so that some wage could be paid while waiting for confirmation by AHPRA of acceptance of general registration.</li> </ul>

## CASE REPORT 3: PSA (NON-PHARMACIST) STAFF MEMBER CONTACTING AHPRA

11. In February 2011, a staff member (who is not a pharmacist) from the PSA National office contacted AHPRA in order to contact (or to leave a message with) the Chair of the Pharmacy Board of Australia, Mr Stephen Marty.

12. The AHPRA telephone operator:
- appeared to be uninformed about who the Chair of the Pharmacy Board of Australia was;
  - was unaware of who the Pharmaceutical Society of Australia is; and
  - asked for the PSA staff member's date of birth, and when advised the person was not a health practitioner, remained unable or unwilling to proceed with the enquiry until a date of birth was provided.
13. The PSA staff member then asked to speak to the telephone operator's supervisor who attempted to answer the query but was unable to do so.

### SUMMARY

14. PSA has provided three case reports which are relevant to this Inquiry. We would be pleased to provide further information or assistance to the Inquiry.

#### Submitted by:

Pharmaceutical Society of Australia  
 PO Box 42  
 Deakin West ACT 2600  
 Tel: 02 6283 4777  
[www.psa.org.au](http://www.psa.org.au)

#### Contacts:

Liesel Wett  
 Chief Executive Officer

Kay Sorimachi  
 Director Policy and Regulatory Affairs

4 May 2011

#### Senate F&PA Committee

##### Tabled Document

Inquiry: Administration of Health Practitioner Registration by AHPRA  
 Date / Time: 4/5/2011 9:28am  
 Witness Name: Ms Liesel Wett, CEO  
 Organisation: Pharmaceutical Society of Australia