

Today's issue of PD

Pharmacy Daily today features two pages of news.

Pharmacy fined

A VICTORIAN pharmacy owner has been ordered to pay \$5,000 for failing to comply with local council planning rules.

Glen Iris Pharmacy's Arthur Nemtsas was found to have breached regulations when he erected billboards at his heritage-listed store without a permit.

A Victorian Civil and Administrative Tribunal noted he had been given several opportunities to remove the signs or submit a retrospective permit, but did not comply.

The Tribunal ruled that Nemtsas had breached planning rules and was ordered to pay \$4,000 in costs and \$1,244 in VCAT application fees.

Regional pharmacy needs a WIP

PHARMACY owners operating in regional cities need access to a Workforce Incentive Program (WIP) rather than \$3,000 from the Rural Pharmacy Maintenance Allowance (RPMA), the Rural Pharmacy Network Australia (RPNA) believes.

RPNA spokesman, Peter Crothers, told *Pharmacy Daily* that the expansion of the RPMA to include hundreds of regional city recipients sent a confusing message.

Crothers said the new RPMA model (PD 04 Jan) had seen many remote pharmacies see their funding drop, while failing to address the workforce issues facing stores in regional cities.

"Pharmacies in regional cities have a really serious problem with the very high cost of recruiting and retaining skilled workforce, especially pharmacists," he said.

"It's now common to have zero applicants for regional city pharmacy jobs even when

advertised at double the Award rate plus other benefits such as extended paid leave, use of a car and rent-free housing.

"It's a major issue. Non-metro owners have been calling for exactly the same sort of WIP that their rural GP and allied health colleagues have access to, in other words a dedicated workforce support program delivering tens of thousands of dollars in incentives per employed pharmacist.

"After being told there would be 'something for them' in the Seventh Community Pharmacy Agreement, regional city owners are waking up to the fact that \$3,000 a year is – as one put it – 'not enough to make a difference' and wondering where they stand on workforce support."

Crothers described the RPMA funding which was based on the Modified Monash Model of rural classification (MMM) as a "policy and political stuff-up", but said that there was an opportunity

to correct it when the current funding matrix expires on 30 Jun.

"We believe that rural community pharmacists' future interests on this matter are better served by working with the Guild and PSA rather than at cross-purposes with them.

"Even so, this really is a stuff-up and it really does need to be fixed.

"We're concentrating our efforts on building the necessary policy insight and political will to get it fixed.

"This new matrix has a six-month shelf-life expiring 30 Jun, which is plenty of time for policymakers to reflect on what has happened and announce something fairer before 01 Jul."

MEANWHILE, pharmacies in MMM category three to seven locations that do not meet the other eligibility requirements can submit an exceptional circumstances request, which could result in partial payments if approved.

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Dispensary Corner

YOU would think that it would be difficult to have someone officially declared dead.

However a long-running dispute between a cleaner and her former boss, Jeanne Pouchain, and a combination of judicial errors led to a ruling that Pouchain was no longer among the living in 2017.

Despite being very much alive, Pouchain's "dead" status has prevented her and her husband from accessing their joint bank account, leading authorities to seize her car over an unpaid debt which she has contested, *Associated Press* reports.

"I no longer exist," she said. "I don't do anything...I sit on the veranda and write."

Adding insult to injury, Pouchain's husband and son were ordered to pay the disgruntled former employee \$22,000 in compensation.

In a fresh bid to revive Pouchain's life, her lawyer submitted an application to invalidate the 2017 decision, describing it as a "grave error".

Pouchain said the appeal was her "last chance to recover my life".



Priceline provides data

FREE in-pharmacy health checks conducted using SiSU Health Stations are providing a deeper insight into the health of Australians, Priceline Pharmacy General Manager, Andrew Vidler, believes.

Vidler said the *Australia's Health Report: when healthcare meets self-care* - which gathered data using the health stations across the Priceline network between Nov 2018 and Oct 2020 - would encourage better conversations between the patient, pharmacist and their GP.

The report found that 133,236 of the 755,778 health checks conducted in Priceline stores resulted in recommendations for users to visit their GP, which Vidler said highlighted pharmacy's frontline role in customers' health management.

The data collected by the health stations found female users less likely to smoke than males (13.8% compared to 18.1%), to have healthier blood pressure levels (10.8% versus 14.8%) and a lower prevalence of diabetes (4% amongst women and 5.8% in men).

The report also noted significant differences in stress levels based



on state, with 10.1% of Tasmanians reporting high stress levels, while those living in the ACT were the least likely to say they were stressed (6.8%).

"At Priceline Pharmacy, we want to provide all Australians with easy access to health resources," Vidler said.

"We've referred more than 130,000 Australians to speak further with a health professional because of a concern that was picked up during the digital Priceline Pharmacy health station check.

"We also have customers continually come back to check in on their health using the Health Stations, helping us build strong relationships to assist them on their health journey.

"We are incredibly proud to be furthering our work in improving the health of our nation."

Inequity of COVAX access a failure

WORLD Health Organization (WHO) Secretary General, Tedros Adhanom Ghebreyesus, is warning that inequity of access to COVID-19 vaccines (COVAX) could put the world "on the brink of a catastrophic moral failure".

Adhanom Ghebreyesus expressed concerns that vaccine manufacturers and wealth nations were speaking "the language of equitable access" while prioritising "bilateral deals" and "driving up prices".

He noted that 39 million doses of COVAX have been administered across 49 wealthy nations, while "just 25 doses have been given in one [of the world's] lowest income countries".

"The situation is compounded by the fact that most manufacturers have prioritised regulatory approval in rich countries where the profits are highest, rather than submitting full dossiers to WHO," he said.

Guild Update

COVID VACCINATION

THE Guild will be keeping Members informed of developments relating to the significant involvement of community pharmacy in the roll-out of the COVID vaccines.

With such a significant task ahead of us to immunise as many Australians who want to receive the vaccine in 2021 - we literally need all trained immunisers to get the job done, and this has been recognised by Health Minister Greg Hunt. We thank the Minister for the support and confidence he has shown in community pharmacy.

Community pharmacists will be vaccinating patients from Phase 2a of the national vaccine roll-out strategy, giving millions of Australians the option of having their vaccination at their local pharmacy.

Pharmacists and pharmacy assistants will be vaccinated as part of Phase 1b, recognising their essential role as health care workers, and standing them in good stead to advise and assist patients seeking information on the vaccine.

We are continuing to work through a number of issues and questions around the involvement of community pharmacy and we will keep Members informed as we gather more information.