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The circular is sent by email to all licence holders and registered premises in addition to being published on the Victorian Pharmacy Authority (the “Authority”) website. Please ensure the circular is made available to all pharmacy staff.

Chair’s message

Welcome to the Victorian Pharmacy Authority Circular No. 8.

The Authority recently reviewed and revised its Guidelines following a period of public consultation. The revised guidelines become effective on 1 October 2016 and are now available on the Authority website.

Included in this circular is a reminder to pharmacists about access to pharmacies and pharmacy departments in Victoria when they are not open for business. The registered pharmacist who is regularly and usually in charge must not allow a person access when the pharmacy or pharmacy department is not open for business unless a registered pharmacist is present. The penalty for a breach is 60 penalty units which is in excess of nine-thousand dollars. It is also an offence under the Act for a licensee or pharmacist regularly and usually in charge to allow a pharmacy service to be provided at a pharmacy or pharmacy department unsupervised by a registered pharmacist.

Email is now the primary method of communication used by the Authority. To ensure that you continue to receive newsletters and other important information please ensure that you have notified the Authority of the preferred email address for each registered premises. Licensees may also provide a separate
preferred billing email address for receipt of annual licence and registration renewal notices and taxation invoices.

It is also a requirement under the guidelines for owners and pharmacists regularly and usually in charge (PRUIC) of a registered premises to notify the Authority as soon as practicable of the name of the pharmacist appointed as PRUIC. This can be via email or other means.

This circular includes a summary of recent panel hearings. I would like to highlight the third case in which a pharmacist commenced to carry on a pharmacy business at a registered premises prior to being granted a licence. When the Authority approves a licence application it writes to the applicant(s) clearly stating that the initial approval in principle is not a licence, outlining the steps that must be taken in order to be granted a licence. It is essential that applicants for a licence to carry on a pharmacy business follow these steps which include notifying the Authority of settlement of purchase on the day of settlement in the case of a transfer of ownership.

Commencing to carry on a pharmacy business prior to being granted licence carries risks relating to Medicare reimbursement and insurance, as well as significant penalties under the Act. There are now flow charts and frequently asked questions available on the Authority website to clarify application processes and I encourage applicants to read these.

It is also important that all pharmacists take the time to familiarise themselves with the guidelines as that is the document which will enable pharmacists to provide a pharmacy service of at least the minimum standard required.

Toni Riley
Chair
29 September 2016
**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. There are also editorial changes.

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

**Need an easy way to find the SUSMP?**

The Standard for the Uniform Scheduling of Medicines and Poisons (SUSMP) is most easily found by visiting the TGA’s website (www.tga.gov.au) and clicking on the words “Poisons Standard” on the right of the screen and following the prompts.

**Department of Health & Human Services website and pharmacotherapy changes**

The Department of Health & Human Services’ website has many helpful and interesting documents about drugs and poisons that can be downloaded. Among these are short summaries of cases involving people impersonating medical practitioners in order to obtain drugs, and forgeries presented by familiar patients. The website is invaluable for students and interns.

The Authority recommends that recent registrants from interstate and overseas view the website to ensure that they are familiar with specific Victorian requirements; for example, doctors and other prescribers are not authorised to prescribe S4 and S8 for self-administration. Instances where a person presents prescriptions for S4 or S8 drugs in a quantity or at a frequency greater than appears reasonably necessary must be reported to the Department.

The website address is: www2.health.vic.gov.au and click on the word “Pharmacists”.

Pharmacists should also be aware that Victoria's *Policy for maintenance pharmacotherapy for opioid dependence* has been revised and became effective from 1 September 2016. The revised policy is available here. The Authority encourages participating pharmacists to utilise the department’s self-assessment form to assess compliance with key pharmacotherapy policy and regulatory requirements. The self-assessment form can be accessed here.

**Abuse of dextromethorphan cough liquids**

Reports have come to hand of abuse of cough mixtures containing dextromethorphan. In particular, Robitussin Dry Cough Forte has been identified as being purchased for non-therapeutic purposes. A report from Central Victoria states that young people have been taking it to get a “high”, to “wipe themselves out”, and for its hallucinogenic properties. Dextromethorphan has, at elevated dose levels, euphoric and dissociative effects.

The product is in Schedule 2.

Abuse of dextromethorphan has not been widely reported in Australia but there have been many case reports in both the overseas professional literature and the media, including the internet.\(^1\) A 2013 Australian paper raised the question of under-recognition of the problem.\(^2\)

As long ago as 2005, the Pharmacy Board of Victoria alerted readers of its Circular to the problem, which seems to occur sporadically. The Authority repeats the Board’s advice: “Pharmacists are asked to be aware of requests for dextromethorphan products, especially by teenagers. The smallest pack size, consistent with the therapeutic need of the purchaser, should be supplied. Note also that dextromethorphan can produce a serotonin syndrome when combined with SSRI antidepressants”.\(^3\)
References:


Requests for large quantities of Schedule Two poisons

Some pharmacies have been contacted by telephone or on-line to supply Schedule Two poisons in quantities well in excess of those required for the treatment of an individual; for example, eight boxes of mebendazole tablets and 25 canisters of an intranasal corticosteroid, ostensibly for personal use. It is believed that these products are later sold “under the counter” by unauthorised persons.

Pharmacists who supply quantities of Schedule 2 poisons, which clearly exceed the quantity that might be required for personal therapeutic use, may be required to justify their actions.

Suppliers of Schedule Two poisons by wholesale must be licensed, except in the case of pharmacists supplying one another in the lawful practice of their profession, Retail supply is limited to pharmacies and licensed dealers – the latter being at least 25 km from the nearest pharmacy.

Access to pharmacies and pharmacy departments

When a pharmacy or pharmacy department is closed for business, the registered pharmacist who is regularly and usually in charge must not allow a person to have access to it unless a registered pharmacist is present. This contrasts with the position in some other states where this is permitted provided the premises are closed to the public.

Section 31 of the *Pharmacy Regulation Act 2010* creates the offence and provides for a penalty of 60 penalty units.

The Authority draws this to readers’ attention as an increasing number of pharmacists practising in Victoria have trained interstate where the law may be different.

Office Consolidation

Hard copy and CD-ROM versions of the Office Consolidation have been discontinued. All of the content is available online. Current subscribers will continue to receive updates if applicable until 31 December 2016.

Keeping of records

The single most common query the Authority receives is “How long do I have to keep records?”

- Prescription records. At least three years. This applies to all dispensed medicines, irrespective of poisons schedule and will be electronic.
- Claimable Pharmaceutical Benefit prescriptions. At least two years as per Medicare auditing requirements.
- Schedule 8 duplicates and register: At least three years.

Physical prescription duplicates that are neither claimable nor S8 *DO NOT* need to be retained by the pharmacy. Private prescriptions, unless for S8, may be returned to the patient.

Email updates

As electronic communication assumes greater importance, the Authority asks that any change in a pharmacy’s email address be notified to the office. At a minimum please ensure that the preferred premises email address for receipt of all communications from the Authority is notified. There is also the option of notifying a separate email address for billing purposes only.
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 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.

Statistics

As at 29 September 2016 there were:

1366 Pharmacies
75 Pharmacy Departments
28 Pharmacy Depots.
<table>
<thead>
<tr>
<th>Members of the Victorian Pharmacy Authority</th>
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<tbody>
<tr>
<td>Ms T Riley (Chair)</td>
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<td>Ms C Fersterer</td>
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<td>Ms E Alter</td>
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<td>Mr R Jamieson</td>
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<td>Mr G Calandra</td>
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<td>Mr R Mullaly</td>
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<th>Authority Pharmacists</th>
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<tr>
<td>Registrar: Mr A Bawden</td>
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<tr>
<td>Senior Pharmacist: Mr D Thirlwall</td>
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<td>Pharmacist: Mr D Newgreen</td>
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<td>Pharmacist: Mrs C Greco</td>
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<td>Pharmacist: Mr G McCurdy</td>
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<td>Pharmacist: Ms J Webster</td>
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</tbody>
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**Telephone:** (03) 9356 8400  
**Facsimile:** (03) 9348 0608  
**Email:** enquiries@pharmacy.vic.gov.au  
**Website:** www.pharmacy.vic.gov.au

You have received this notice because you are a licensed pharmacist and/or an owner representative of a registered pharmacy premises.

Click here to unsubscribe. You should note, however, that email is now the normal means of communication and hard copy will not be sent.