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Media release

OTC scheduling system to be retained

The Pharmacy Guild of Australia has welcomed news that our current medication scheduling system, including two separate over-the-counter (OTC) schedules, will be retained.

“This is a welcome Christmas present for community pharmacy, which will provide increased certainty and stability for the profession,” Guild National President Kos Slavos said.

The Department of Health and Ageing’s National Coordinating Committee on Therapeutic Goods (NCCTG) has responded to the Guild’s submission on the need to retain the two OTC schedules – Pharmacy Medicines (S2) and Pharmacist Only Medicines (S3). The NCCTG acknowledged that a number of changes had occurred since the Galbally Review of Drugs, Poisons and Controlled Substances Legislation was published in 2001, which examined the need for continuing two separate schedules. These changes included widespread adoption of the Quality Care Pharmacy Program (QCPP) and the launch of QCPP 2nd edition in 2006, as well as continuing development of self-care concepts in the primary health care sector, and ongoing health workforce reforms, such as the Pharmacy Board of Australia and its new national standards and guidelines for pharmacists.

The NCCTG concluded that, based on these changes, it was appropriate to retain two OTC schedules at this time. This decision was also endorsed at the recent Australian Health Ministers’ Conference (AHMC).

The Guild also recommended that the mystery shopper program supporting these schedules should be maintained. Results gathered through the program from 2002 to date led to the NCCTG recommending that additional training with regard to S2 medicines for pharmacy assistants be in place by 2014. But it also concluded that the mystery shopper data was valuable and therefore agreed that this activity should also continue. The Guild has undertaken to provide the NCCTG more detailed analysis of this data.

The Galbally Review was commissioned in 1999 by the Council of Australian Governments (COAG) as part of the National Competition Policy in 1999. One of the recommendations was to determine whether the two schedules should be retained or combined into one schedule with new criteria. In June 2006, the Guild was formally advised by the NCCTG that the AHMC had agreed to retain both schedules for a further five year period, during which evidence was to be collected to demonstrate the need and benefit of keeping them.

The Guild finalised two key projects in order to meet this requirement, namely a research and development project under the Fourth Community Pharmacy Agreement that identified the number of customers seeking S2 medicines and their views on having access to pharmacist advice; and a

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Standards Maintenance Assessment (SMA) as part of the mystery shopper program managed under the QCPP. The SMA demonstrated the extent of pharmacy intervention in direct product request sales for S2 medicines, as well as the compliance by pharmacy staff to standards and protocols applicable to the supply of S2 and S3 medicines. The program also assessed the differences in level and quality of the intervention between jurisdictions with different storage requirements.

“I would like to thank the Guild staff and National Councillors who assisted with this important project over many years. I especially would like to reflect on the work undertaken by the late Judy Liauw – the former Tasmanian Branch President, who was a tireless worker for the Guild and its members – in presenting our final report and data, along with the Guild’s Director of Quality Assurance and Training Jenny Bergin, to the NCCTG earlier this year,” Mr Sclavos said.

“The enormous effort and substantial investments made by the Guild over the years on this issue have proven worthwhile.

“Similarly, I would like to thank Guild members and their staff, whose dedication to continuous quality improvement – primarily through QCPP – and efforts to up-skill their staff members through S2 and S3 training have helped to secure this result.”

Mr Sclavos said two separate OTC schedules were undeniably beneficial to the health system and to the Australian public. This system alleviated pressure on Medicare and other services, as well as provided increased access and convenience to patients needing these medicines.

“It is important, however, for pharmacists and pharmacy staff to remain vigilant with regard to our OTC schedules and committed to the necessary training to ensure pharmacies are providing these medicines to the community in an appropriate way. If regulators cannot see the benefits for the community in our current scheduling arrangements, they could be threatened again at some point in the future,” Mr Sclavos said.

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