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## Message from the Chair

Tēnā koutou katoa

In this issue we celebrate the commencement of the Medicines (Designated Pharmacist Prescribers) Regulations 2013 and the registration of the first pharmacists in the new Pharmacist Prescriber Scope of practice. At a recent function celebrating the achievement of all those involved, I was privileged to present the first certificates of registration in this scope, thus marking the beginning of a new era for pharmacists in New Zealand.

This newsletter provides you with information about the new Scope of Practice and I encourage you to familiarise yourself with this. There are also updates on the review of our Competence Standards and Return to Practice Policy.

We encourage your feedback on any of these articles and on how we can best keep you informed of the Council's activities.



Andrew Bary  
Chair

## Congratulations to our first Pharmacist Prescribers

We are delighted to announce the registration of the first pharmacists in the Pharmacist Prescriber scope of practice. These are highly skilled and very experienced clinical pharmacists who have completed extra qualifications and requirements and are now able to chart or prescribe medicines within a collaborative team environment.

The move is part of a wider Government strategy to help the country cope with increasing demands on health services by strengthening the health workforce and improving patient access to integrated health care.

Fourteen pharmacists completed the inaugural prescribing course in 2012, run by the Pharmacy Schools at the University of Auckland and University of Otago, and another four are enrolled this year. One of the 14 is Primary Care clinical pharmacist Kerry Muller, working within a large medical centre in the Hutt Valley. Kerry sees part of her role as the fine tuning and adjustment of medicine dosing. "Prescribing is not just about starting medicines. It often takes several adjustments to get the dose right for the patient. I work closely with the GP and patient to implement the prescribing plan, seeing the patient when necessary and making sure we get the medicine just right."

Pharmacist prescribing has been a reality in the UK for a number of years with the benefits becoming increasingly evident. The winners of the 21<sup>st</sup> Pharmaceutical Care Awards evaluated the impact of independent pharmacist prescribers on hypertension management. The team assessed whether pharmacist prescribers can safely and effectively manage hypertension and associated cardiovascular risk factors. Interventions by the pharmacists included optimising patients' therapy by tackling adherence issues, starting new medicines, changing doses or stopping medicines that were not tolerated. Patients with controlled blood pressure at referral also benefited from pharmacist input through the improved management of side effects and other cardiovascular risk factors.

Our pharmacist prescribers will be working in a range of clinical areas including:

- Overall drug therapy management for diabetes, hypertension, gout
- Care of older patients with complex needs on multiple medicines
- Acute pain in the emergency care setting
- Warfarin management for medical inpatients and in the community
- Paediatrics and neonates
- Total parenteral nutrition.

For further information, please see [www.pharmacycouncil.org.nz/prescriber](http://www.pharmacycouncil.org.nz/prescriber)

## Competence Standards Review

The Reference Group contracted by Council to provide advice and guidance on the review of the Competence Standards has discussed the inclusion of 'administration of medicines' in the pharmacist scope of practice, and the development of an associated competence standard.

Administration of medicines is something pharmacists are often called upon to do. More often than not it may simply involve applying a topical preparation, cleaning a wound and applying a dressing or instilling eye drops for a patient. Many of our colleagues are now administering flu vaccinations and we are likely to see more expanded roles in the area of health prevention in the future.

To ensure the proposed standard is future proofed and addresses the various situations that may arise we would like to collect examples of situations where pharmacists have been asked to 'administer medicines' even if you have not done so e.g. insulin or EpiPen® injections. If you have an example you would like to share (and these will be anonymised), please send by email to Barbara Moore at [b.moore@pharmacycouncil.org.nz](mailto:b.moore@pharmacycouncil.org.nz), putting **CS review** in the subject line.

## Pharmacists Returning to Practice

The Pharmacy Council is reviewing the Return to Practice policy and would like feedback from pharmacists who have direct or indirect experience of the current policy.

The requirements set by Council for pharmacists returning to practice, vary according to the time away from practice. For further information on the current policy, click [here](#).

Have you-

- Returned to pharmacy after time away from work?
- Returned to practice in New Zealand after practising in another country?
- Supervised a pharmacist returning to practice?
- Worked with pharmacists after they've completed the return to practice process.
- Considered returning to practice?
- Strong opinions on the current requirements?

If any of the above applies, we would like to hear from you. To access our online survey, click [here](#). The survey will close on the 31 August.

## Pharmacists Trusted in New Zealand

In the recent Reader's Digest survey, once again pharmacists were voted 7<sup>th</sup> on the list of the top Most Trusted Professions in New Zealand. To view the full list, click on this link [New Zealand's Most Trusted Professions 2013](#).

## Practice Issues

### Flu vaccinator refresher courses

Consumers have been able to access flu vaccinations from pharmacists since 2011, with increasing numbers of our colleagues undertaking training. To become a vaccinator, you must complete an approved vaccinator's training course and comply with the Ministry of Health's immunisation standards. The standards also require that vaccinators attend an approved update course, or complete the online vaccinator update course every **two** years to remain current.

Ongoing vaccinator update courses are designed to provide you with up to date information on changes in immunisation theory, practice and policy at a national and local level to ensure you have the appropriate competencies to vaccinate safely. These can be accessed on the IMAC website.

We will maintain a register of current pharmacist vaccinators on the Council website. IMAC advises Council on a quarterly basis of those pharmacists who have passed the assessment; if you do not wish to have your name added to the database, please let us know once you have completed the course. As a reminder, if you do not complete the refresher course, your name will be removed from the database.

### Generic packaging

The ever increasing number of generic medicines on pharmacy shelves has the potential to increase the risk of dispensing errors, particularly where packaging and tablet appearances are very similar. Consider the following:

- Zarator and metformin tablets look alike and are often dispensed together. Take care when dispensing – count or pour and label one medicine before dispensing the next
- Prednisone, primidone, nadolol, timolol – similar size and colours on the bottles; similar tablets inside
- Amlodipine and allopurinol – small white tablets in similar bottles, and usually stored near each other on the shelf
- Amitriptylline 10mg and quinapril 10mg – if you don't store generically but have the generic Accupril near the amitriptylline, these are easy to confuse
- Look-alike names – sertraline 50mg, Siterone 50mg, Serophene 50mg. Extra care is required when selecting them from the drop-down menu in the dispensary software.

These are just a few of the potential errors waiting to happen – when dispensing more than one item, take items from the shelf one at a time. Count or pour and label one at a time. Check the name and strength against the prescription, not the label. Leave all stock bottles used beside the dispensed medicine for an accuracy check.

### ***'Open for better care'***

The Health Quality and Safety Commission have recently launched a patient safety campaign, *'Open for better care'*. This focuses on four key areas where it is possible to reduce patient harm:

- Falls
- Peri-operative care
- Healthcare associated infections

- Medications

The campaign challenges healthcare workers to be *open* to acknowledging mistakes and learning from them, to be *open* to working with patients and consumers, and *open* to change, improvement and innovation.

The campaign will start with the reduction in harm from falls. Considering most falls occur in the community, the campaign will include aged care and community settings. Resources including videos, patient information and checklists are available on [www.open.hqsc.govt.nz](http://www.open.hqsc.govt.nz)

### **PHARMAC subsidy for Pharmacist prescribers**

PHARMAC began subsidy for pharmacist prescriber prescriptions from 1 August 2013 which means for the first time, you will be dispensing prescriptions written by your colleagues.

Pharmacist prescribers are designated prescribers and will be able to prescribe up to three month's supply for a community pharmaceutical and up to six months of an oral contraceptive. They will also be able to prescribe up to three days' supply for controlled drugs, including Class B and Class C controlled drugs. As with other prescribers, it is essential you act in the best interests of the patient and contact the pharmacist prescriber if you need to clarify any unclear or incorrect prescriptions.

Their prescriber number will be on each prescription and will be the Council registration number preceded by 'PC'. When adding them as a new prescriber in your dispensary software, the professional group that must be assigned is 'Pharmacist'. On the TONIQ system, it will ask you to configure the number as PC00-xxxx; Healthsoft (LOTS) only requires PCxxxx after adding all other required details. If you receive a prescription from a pharmacist prescriber you are not familiar with, you can check Council's website to confirm they are registered in the prescriber scope.

## **In an Emergency**

The recent earthquakes in Wellington have been a healthy reminder to all that it is essential to be prepared for any emergency. We are happy to advise that our premises are safe and unscathed from the earthquakes and that our emergency policies, procedures and our business continuity plans are robust and up to date.

If you wish to contact the Pharmacy Council urgently in the event of an earthquake or a significant event, please visit our website [www.pharmacycouncil.org.nz](http://www.pharmacycouncil.org.nz) for updates relating to the Council's emergency response.