

INDUSTRY PROFILE - Community Pharmacy



Community Pharmacy

ANZSIC: 3720

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1: Industry Background (i.e. Regulatory and/or Licensing Bodies)

As of June 2022, there were 5,901 Community Pharmacies in Australia. Of these, 647 are in Western Australia, providing services to approximately 2,762,000 West Australians.¹

These 647 Community Pharmacies play a critical role within the WA healthcare system through the provision of prescription-based medicines, non-prescription-based medicines and a wide range of information and healthcare services including preventative health, complementary medicines, disease monitoring, vaccinations, and illness treatment. For regional and remote communities, the role of Pharmacies has become even more essential as they provide an access point to health services, which can otherwise be limited due to distance and location.

In Western Australia there are multiple licenses and permits required to run a Community Pharmacy.¹ These include:

- Businesses that sell medicines and poisons wholesale or retail require a license under the Medicines and Poisons Act 2014.²
- Retail pharmacies must be licensed under the Pharmacy Act 2010.
- The Health Practitioner Regulation National Law (WA) Bill 2010 provides for a national registration and accreditation scheme for health practitioners which includes Retail Pharmacists.³

Requirements to practice as a Retail Pharmacist include:⁴

- Complete an approved program of study, internship and examination.
- Meet national registration standards, codes and guidelines.
- Renew registration every year and notify the Board of changes to principal place of practice, name or address within 30 days.
- Maintain recency of practice.
- Carry out and record continuing professional development (CPD).
- Make mandatory notifications about 'notifiable conduct'.
- Comply with audits to check renewal declarations.
- Participate in the National Registration and Accreditation Scheme (NRAS)⁵.

For non-pharmacist roles (e.g., Pharmacy Assistant and Pharmacy Technician) there are no occupational licensing requirements, certifications, or specific legislative requirements. However, they must comply with federal, state and territory laws, associated and key legislative bodies include:

- Government of Western Australia Department of Health
- The Pharmacy Board of Australia (PBA)
- The Pharmaceutical Society of Australia (PSA)

An important agreement covering the delivery of Community Pharmacy services in Australia is the Seventh Community Pharmacy Agreement (7CPA).⁶

The 7CPA is between the:

- Minister for Health and Aged Care
- Pharmaceutical Society of Australia
- Pharmacy Guild of Australia

The agreement goes until 30 June 2025. but may be replaced with a new agreement sooner. It outlines the Australian Government's agreement to reimburse pharmacists for:

- dispensing subsidised medicines on the Pharmaceutical Benefits Scheme (PBS)
- community pharmacy medication management programs and services.

¹ License, permits and requirements to practice can vary depending upon the State.

The agreement aims to:

- provide Australians with access to safe, affordable life-saving medicines
- improve patient choice and health literacy.
- benefit Aboriginal and Torres Strait Islander people.
- assist rural and remote residents.

The 2020 Seventh Community Pharmacy Agreement (7CPA) expressed the government's commitment to enhancing patient choice, health literacy, and access to medicines through community pharmacies. The agreement led to pharmacists working more closely with the public by providing increased health care advice and information.⁷ Consequently, Community Pharmacies have become important healthcare destinations, offering guidance on preventative health measures, disease monitoring, and vaccinations, and meeting the demands of the expanded clinical role of pharmacies. According to a 2020 Commonwealth Bank Pharmacy Barometer Report (n=360), pharmacists estimate that almost 40% of their time is now spent on non-dispensing health advice.⁸

Negotiations for the Eighth Community Pharmacy Agreement (8CPA) have commenced with the concluding date for negotiations being set as the 30th of June 2024.⁹

2: Workforce Opportunities and Challenges

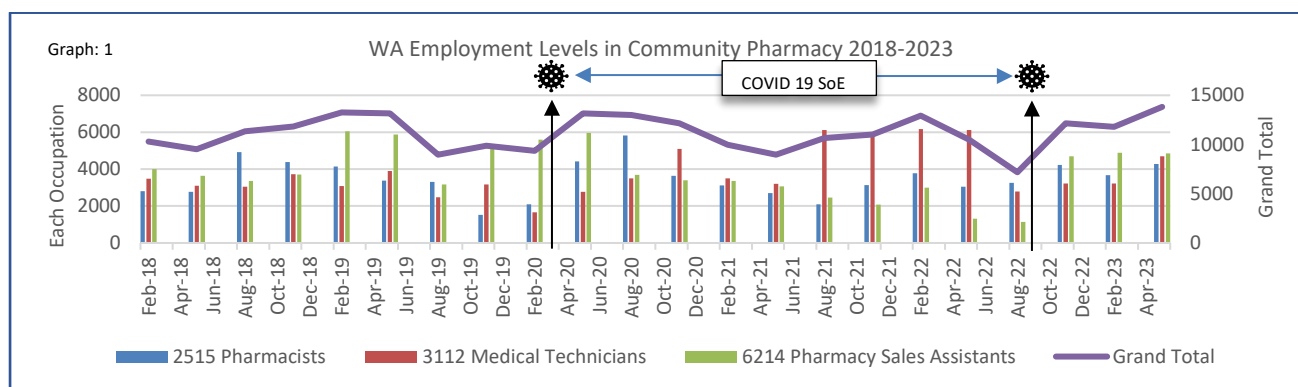
2.1: Opportunities

- In 2020 the Seventh Community Pharmacy Agreement (7CPA) confirmed the Government's ongoing commitment to improving patient choice, health literacy and access to medicines through their community pharmacies.¹⁰ Pharmacies are increasingly becoming a point of contact for health services. Pharmacists continue to become more involved with in-patient care (e.g., counselling patients about their medications, providing immunisation, check certificates, and liaising with GPs) and are no longer limited to staying behind-the-counter dispensing medication¹¹. As a result, the industry is seeking to upskill staff to assist the pharmacist in providing support with more complex tasks and responsibilities, such as dispensing medication.
- In April 2023, the Federal Government announced that the Community Pharmacy sector would receive \$350 Million to provide on-site Pharmacy services to government-funded aged care facilities.¹² Such initiatives form a larger set of policy goals focusing on expanding Community Pharmacy's scope of practice. At a recent press conference, the Federal Minister for Health confirmed their commitment to providing funding to Community Pharmacies so they can deliver more health services to their local communities.¹³
- With the expansion of scope, pharmacies may look to offer professional "fee for service" health models in preventative and primary health care, including vaccinations, health screening services and medicine reviews. Accelerating this trend-driven is a need to develop funding models outside the Community Pharmacy Agreement. For example, the Pharmaceutical Society of Australia (PSA) is advocating that community pharmacies be allowed to administer all NIP (National Immunization Program) funded vaccines, alongside administering prescribed injectable medicines and providing treatment for minor ailments.¹⁴
- An ageing population will place demands on health provision and budgets. Community Pharmacy already plays a critical role in providing services and medicines to West Australia's ageing population, and so is seen as an efficient pathway through which government could roll out initiatives. According to the Australian Institute of Health and Welfare, people aged 65 and over account for nearly 55% of all PBS medicines dispensed.

Projections based upon "Western Australia Tomorrow population forecasts"¹⁵

Industry Profile – Community Pharmacy

- As of 2023 WAs population over 65 is 447,960
- By 2028 those over 65 will be 535,240 which translates to 19% growth from 2023 to 2028
- By 2031 those over 65 will be 586,670 which translates to 31% growth from 2023 to 2031
- Graph:1 ABS Workforce data for the previous five years, coupled with stakeholder feedback, point to changing industry needs which may signify certain trends within the CP sector. Leading up to COVID-19, Pharmacy Assistants were a large proportion of the CP workforce. However, during the WA State of Emergency (SoE) COVID-19 there appears to be a move towards a more highly skilled fore of dispensary assistants. The reasons for this given were:
 - Community Pharmacies moving/up-skilling employees into more senior positions to support the pharmacist role and not replacing the Pharmacy Assistant position – as the Pharmacy Technician role can fulfil the needs of both positions. Or replacing the Pharmacy Assistant role with General Sales Assistant role.
 - The move to employ more Dispensary Technicians may also be driven by CP owners looking to free up Pharmacists so they can spend more time advising customers. This may also be a factor in the continued high workforce numbers, and demand, for Pharmacists.



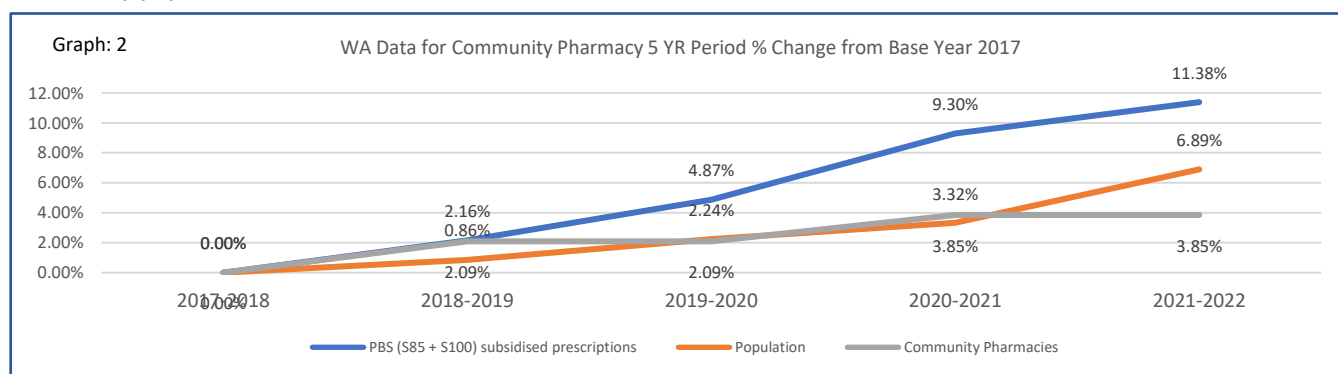
2.2: Challenges

- WA Pharmacists report that they face constant financial pressure due to ongoing Pharmaceutical Benefits Scheme (PBS) regulatory reforms. These have, in combination with the remuneration pharmacies receive from the government, affected the pricing and profitability of prescription medicines.¹⁶ This reported strain on Community Pharmacy finances, combined with fierce competition in the sector from discount pharmacies and supermarkets,¹⁷ has constrained wage growth and led to businesses, especially in rural areas, struggling to employ and retain staff.¹⁸
- As of March, the annual Consumer Price Index has reached 7%, highlighting ongoing inflationary pressures over the previous 12 months. Pharmacies buy many of their products via Wholesalers, who acquire goods from manufacturers and distribute them to downstream markets, which are experiencing an increase in prices. This is putting pressure on Pharmacy margins as they struggle to respond to constant price fluctuations. ABS reported that *“The most significant price rises were Medical and hospital services (+4.2%).”*¹⁹
- As of September 1, 2023, the Federal Government announced that patients suffering from chronic illnesses will have access to two months' worth of common PBS-listed medications for the price of a single prescription. This impacts cash flow for Community Pharmacies as this means one dispense fee for each 2-month supply (instead of one dispense fee per 1-month supply). The new policy will be rolled out in three stages over the course of 12 months and will apply to over 300 common medicines listed on the PBS. The Federal Government estimates that By September 1, 2024, 6 million Australians who require regular medication for chronic conditions will see a decrease in their medical expenses, with some experiencing up to a 50% reduction in costs. The independent Pharmaceutical Benefits Advisory Committee (PBAC) recommended this change for stable, chronic conditions based on clinical expertise.²⁰ In response to this change in policy the Pharmacy Guild of Australia PGA (the main peak body representing

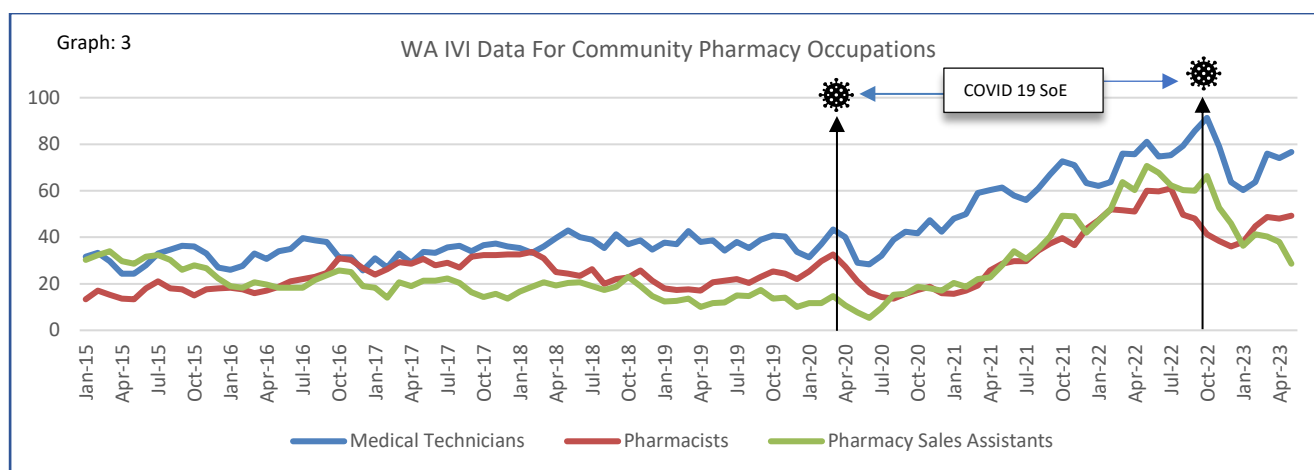
approx. 90% of independent Pharmacy Businesses), released a report stating, at the very minimum, the financial cost to the Community Pharmacy sector would amount to \$3,391.4 Million over a four-year period. This estimate was based upon various factors including, the fall in the number of prescriptions dispensed and the flow on impacts of customers making fewer visits to their local pharmacy - which generates revenue from non-medical retail sales. Further estimates were made of anywhere between 200 and 944 Community Pharmacies closing - with up to a projected 10,000 job losses.²¹

- Mental Health has become an increasing issue in the Community Pharmacy sector. Due to increased workloads and the continuing demands made by COVID-19 booster vaccination, there is a growing feeling of dissatisfaction among those working in the industry which has led to an exodus of pharmacists and a decline in new registrations²² which in turn leads to an increased pressure on Pharmacy Assistants and Pharmacy Technicians.²³ The challenge for the industry is to ensure better working conditions for both the Pharmacists and support staff.
- Industry reports that there is an elevated turnover of Pharmacy Assistants which has possibly multiple causes:
 - limited career advancement.²⁴
 - Low award rate for a role that requires a high level of product knowledge.²⁵
 - A large proportion of the workforce is young and female. Industry reports many often leave to start families.²⁶
 - For regional areas there are issues with high housing costs and a lack of affordable childcare options.

2.3: Supply and demand for workforce



- Graph:2 Since 2017/18 WA Community Pharmacies experienced an increase of 11.38% in the number of subsidised prescriptions administered under the Pharmaceutical Benefits Scheme (PBS) – from 18.14 Million to 20.204 Million in 2021-2022.²⁷
- Industry reports that the demand for Pharmacy Sales Assistants and Pharmacy Dispensary Technicians in Western Australia remain persistent and is anticipated to grow in the next five years due to the expansion of services aimed at meeting evolving customer expectations.²⁸ Pharmacies are increasingly becoming a point of contact for professional health services and medical guidance. Moreover, the adoption of telehealth structures by many medical practitioners is expected to drive more foot traffic to pharmacies, significantly increasing workloads for pharmacists and their support staff, including Pharmacy Sales Assistants and Pharmacy Dispensary Technicians.
- Graph:3 While data is not available for the ANZSCO 311215, data is available for the parent occupation Medical Technicians. Internet Vacancy Index data shows a continuing demand for Medical Technicians, whilst demand for Pharmacy Sales Assistants appears to have subsided.²⁹ One possible reason given by the industry is that Community Pharmacy owners are looking to upskill their workforce - which is driving a move towards Dispensary Assistants and a move away from Pharmacy Assistants.



- Labour Market Insights projects future labour market growth nationwide of approximately 20.7% for the parent occupation of Medical Technicians from 35,200 to 42,400 by 2026.³⁰ Whilst IBISWorld reports steady annual industry workforce growth of around 2.6% over the same period driven largely by Australia's ageing population and the respective expansion of service provision.³¹ Pharmacy Sales Assistants are expected to grow by a more moderate 7.7% from 25,600 to 27,600.³²
- Woolworths recently acquired, via its subsidiary, HealthyLife, the non-retail assets including key technology and a warehouse, of SuperPharmacy, an online pharmacy specialist with six stores. Woolworths says it is not planning to integrate these services into its Woolworths grocery business. Currently Section 90 of the National Health Act 1953 requires any new pharmacy or relocation of an existing pharmacy to be approved in order to supply pharmaceutical benefits.³³ The Pharmacy Guild did confirm that it "contacted the pharmacy authorities in all jurisdictions across Australia to ensure this partnership meets all the state and territory-based registration requirements that all pharmacies must comply with,"³⁴ However, if legislation were to change in a way that allowed Woolworths the capacity to open dispensary services, then this would have an impact on the Community Pharmacy sector.

2.4: Technology

- Pharmacies are currently exploring alternative funding models beyond the Community Pharmacy Agreement to strengthen their presence in the primary care field. This includes expanding their role as health hubs within the community. In certain cases, pharmacies may seek to collaborate with telehealth consultation companies to broaden their range of services.³⁵
- To increase their online offerings, pharmacies may seek to incorporate new technologies such as e-commerce platforms and click-and-collection options. Developing their own omnichannel experience and offering the capacity to order 24 hrs.³⁶
- Regarding ChatGPT, for the retail, business management, and customer service aspects of Community Pharmacy opportunities exist around improving systems and the customer experience. However, there are concerns about AI technologies taking on consultancy roles and providing customers with medical advice. In January 2023 ChatGPT was tested on a selection of questions from the Pharmacist Intern exam. The results show that the AI-powered computer did well in multiple-choice questions, scoring 64%. Yet struggled with more complex questions, scoring only 46%.³⁷
- Larger Pharmacies utilise automation systems, such as ones for dispensing medication, packaging and labelling, tabletop counters, compounding, medication storage, and retrieval. Such automation systems allow for more compact storage whilst also saving time and floor space, enabling pharmacists to focus on providing other clinical services. The impact of these technologies is still unclear, stakeholders report that they view them not as tools to replace staff, but to free staff from time-consuming and repetitive tasks so they can focus on providing advice and assistance to customers.³⁸

2.5: Post State of Emergency: Ongoing Impact of COVID-19 to the Workforce.

- Western Australia's State of Emergency and the Public Health State of Emergency came to an end at 12:01 am Friday, 4 November 2022. There are currently no declarations in place relating to COVID-19 in Western Australia.³⁹
- As can be seen in Graph 3 the period during which the COVID-19 State of Emergency (SOE) was in place was also a period of high workforce demand. Not only was there high workforce demand there was also a shift in reported occupation employment numbers - from Pharmacy Assistants towards Medical Technicians. The industry reported that this was due in part to CP businesses moving staff into Dispensary roles to support the Pharmacist. What is noticeable is that post-SOE workforce.
- As frontline workers providing COVID-19 health and medical support Community Pharmacy staff continue to play an important part in disseminating advice and monitoring the local community for possible outbreaks. At the same time, staff continue to operate under many of the new processes and protocols that were put in place during the period that the State of Emergency was in place. For example, the PSA advises their members to continue the provision of physical barriers, the use of hand sanitiser, the wearing of face masks and ongoing cleaning protocols.
- Due to the successful roll-out of COVID-19 vaccination initiatives, Community Pharmacy has taken the opportunity to promote the sector as a viable partner in the delivery of allied community health services.⁴⁰ The outcome of this may lead to a re-evaluation of the roles and responsibilities of Pharmacy Assistants and Pharmacy Technicians. The outcome of this may require new skills and therefore updated training requirements.
- With reference to COVID the most recent 2022 Commbank Pharmacy Report found that over half of pharmacists surveyed saw changes in their professional activities, specifically in MedsChecks and other medication management services, such as pharmacy screening and monitoring services, vaccinations, deliveries, Dose Administration Aids, and workflow procedures. These changes, coupled with changes in service delivery via digital practices and telehealth, meant that Pharmacies witnessed a growing move towards a hybrid model of service provision integrating many of the practices established during COVID into more traditional service models.⁴¹

2.6 Migration

State Nominated Migration Program

Pharmacy Technician: Community Pharmacy State Nominated Migration Program List 2023-24

Minimum points: 65

Visa type: V190, V491

Stream type: Graduate

Priority occupation

Applicants who have a nominated occupation may be eligible for Western Australian State nomination if they can also meet the relevant stream requirements.

Minimum points: 65

Visa type: V190, V491

Stream type: General — WASMOL Schedule 1

Priority occupation

Applicants who have a nominated occupation may be eligible for Western Australian State nomination if they can also meet the relevant stream requirements.

Retail Pharmacist: Community Pharmacy State Nominated Migration Program List 2023-24 ⁴²

Minimum points: 65

Stream type: Graduate

Visa type: V190, V491

Applicants who have a nominated occupation may be eligible for Western Australian State nomination if they can also meet the relevant stream requirements.

Graduate stream — A skilled migration pathway for eligible international students who are completing vocational education and training (VET) or higher education qualifications in WA.

Minimum points: 65

Stream type: General — WASMOL Schedule 1

Visa type: V190, V491

Applicants who have a nominated occupation may be eligible for Western Australian State nomination if they can also meet the relevant stream requirements.

General Stream - skilled migration pathway for a range of occupations and industry categories.

- The industry is now pro-actively seeking migrants to fill vacancies.^{43 44} The WA Pharmacy Guild of Australia (PGAWA) recently held an online webinar to assist pharmacists looking to migrate to Australia ⁴⁵
- New Zealand - Migrant Registered Pharmacists from New Zealand can work in Australia - They must register with the Pharmacy Board of Australia. There may be a short period of oversight to ensure proficiency.
- Non-New Zealand residents must: ⁴⁶
 1. Register with the Pharmacy Board of Australia
 2. Apply for VISA subclass 494.
 3. Pass the Australian Pharmacy Council Exam
 4. Complete a period of supervised practice.
 5. After fulfilling the above conditions, candidates can apply for a Skilled Regional 191 Permanent Residency VISA.
- Canada, USA, UK - There are provisions that provide an expedited pathway to work in Australia. The skills assessment can take as little as 4 weeks. However, the prospective Pharmacist still has to go through the VISA process once they have completed the skills assessment etc. This can still take up to 12 months. ^{47 48}
- Further migration Issues - The industry reports the processing times can still take a long time. The process can be complex and expensive.
 - Cost issues. The skilled migration incentive is currently only for persons living in Australia on family, partner, humanitarian, or refugee visas. ⁴⁹
 - Applicants have also found it difficult to pay when they are based in other countries - due to banking restrictions. For example, Egypt has a limit on Credit Cards as to what a person can pay to overseas organizations. ⁵⁰
- Student VISAs - As part of the Quality Care Pharmacy Program (QCPP), all pharmacy floor and dispensary staff in Australia must complete SIRCIND002 to work with pharmacy medicines and pharmacist-only medicines.. As a result, employers have requested that the course be delivered to international students. However, the requirement of being a CRICOS registered provider to deliver training to international students is a barrier to Community Pharmacies employing these students.⁵¹ This is an industry-wide issue impacting all training providers who deliver SIRCIND002. Without having completed this course, learners on a student 500 visa are severely limited in their role in a pharmacy.⁵²

3. Environmental, Social, and Corporate Governance (ESG)

- Climate change and the concept of Environmental, Social, and Governance (ESG) have been determined as a priority for the State government regarding future policy objectives.⁵³ The plans cover aspects such as community relationships, reputation, labour relations, indigenous policies, diversity, and inclusion. Lastly, the criteria include the procedures that enable effective decision-making to comply with the law and satisfy the needs of stakeholders.

The 8 priority industries identified by the WA State Government are:

- Energy
 - Tourism, events, and creative industries
 - International Education
 - Defence industries
 - Mining and METS
 - Space Industries
 - Health and medical life sciences
 - Primary industries
- The Western Australian Government implemented a state-wide ban on the supply of certain plastic items to reduce plastic pollution. The “Plan for Plastic” initiative includes introducing regulations to ban single-use plastic items in a two-stage approach. The Stage 1 regulations came into effect on 1 January 2022. The most noteworthy item for retailers in stage 1 is thick plastic bags. Stage 1 was fully implemented on 1 October 2022. All Stage 1 items are now banned. Stage 2 of the WA Plan for Plastics came into effect on 27 February 2023. Stage 2 includes a second set of single-use or disposable plastic items and materials that will be phased out between 1 September 2023 and 1 July 2025. For retail businesses, Stage 2 regulations ban the sale and supply of loose and moulded expanded polystyrene packaging, degradable plastics (plastics designed to break up more rapidly into fragments under certain conditions) and produce bags.
 - On 10 February 2023 the Pharmaceutical Society of Australia, which represents approximately 17,000 pharmacists across Australia, released an Environmental Sustainability Position Statement.⁵⁴ The statement set out four main goals that the PSA requests the Federal Government and PSA members take action on:
 1. PSA calls on pharmacists to work towards limiting the negative health impacts caused by climate change. PSA will support pharmacists to fulfil their professional obligation to implement measures to create environmentally sustainable practices and provide environmentally sustainable clinical care.
 2. PSA urgently calls on all levels of government to develop and implement a nation-wide plan to decarbonise the healthcare sector and transition to climate-resilient health services.
 3. PSA calls for strong and effective action by all stakeholders to limit all forms of air pollution to reduce the health risks it poses from respiratory, cardiovascular and other diseases.
 4. PSA seeks government action to raise awareness and increase access to safe and responsible medicine disposal services for all members of the community and health care professionals.

The statement identified specific targets and stated that the PSA supports *“the view of experts that a more ambitious national target of 75% reduction in greenhouse gas emissions below the 2005 levels is needed in all sectors by 2035 to achieve this goal. This target must explicitly include a plan for the health sector, and also consider the health impacts (benefits and harms) of all climate policies.”* The statement also went on to say that *“Pharmacists in leadership roles have an additional responsibility to oversee a transition to more environmentally sustainable practice, including, choosing environmentally sustainable providers for goods and services they oversee, incorporating sustainability into accreditation requirements and, where possible, influencing more sustainable supply chain and manufacturing processes.”* Highlighting their desire for a sustainable practice to be part of training and workforce development policy objectives.

4. Training and Education Needs

4.1: Current and anticipated training needs of industry

- As with other sub-divisions of retail Community Pharmacies have seen a dramatic increase in their use of technology. There are mandated requirements such as the uploading of customer information to the Australian Immunisation Register (AIR) was mandate. Staff are now required to learn specialist online systems such as Provider Digital Access (PRODA),² and train on booking and dispensing systems. The impact of COVID-19 also had implications on the use at new technologies to assist customers.⁵⁵
- COVID-19 highlighted how vital Community Pharmacies, and the services they offer during such disruptive events, are to the well-being of all West Australians. COVID-19 has also emphasised the need for building a workforce that is both prepared and resilient enough to ensure it has the capacity to deal with any similar community health emergencies that may occur in the future.
- Remote forms of consultation “Telehealth” services. valuable to people who are geographically or socially isolated and are unable to easily access their local community pharmacy or other health services in a timely manner.⁵⁶ This will require training in telehealth delivery.
- Customer health records/data and privacy. Recent database breaches of Medibank customer records have raised public awareness and concerns about such issues.⁵⁷ This may require specialist units of competency. Industry reports that smaller pharmacies, due to pressures, may not rate data security as a priority.⁵⁸
- Growth in client support technology will require a better understanding of systems. Pharmacy staff already interact with multiple databases and customer health management systems. In the 2022 Commbank Pharmacy Insights Report pharmacists indicated that they will be implementing systems to accept scripts via email, mobile app, and Active Script List (ASL). The Australian Digital Health Agency reported that more than 37 million electronic prescriptions were issued between May 2020 and February 2022.⁵⁹
- Robotic dispensers - CP technician is aligned to the role of Pharmacy Dispensary Technician. Industry reports that Robotic dispensers may impact Retail Pharmacists and Pharmacy Dispensary Assistants. Such technology may require specialist units of competency.
- Increased scope of practice for Community Pharmacies will require a broadening of the skills base. For example, as the WA population ages, staff will be required to understand the medical needs, and the health support programs related to, those in this demographic requiring more specialist units and specialized roles. For example, Aged Care Community Dispensary Technicians. The recent Federal initiative to fund Community Pharmacies in providing aged care support will only accelerate this process - having dedicated Pharmacy Dispensary Technicians with specialist knowledge may be valuable.^{60 61} The annual Pharmacy Forecast Australia 2022 report focuses on Hospital Pharmacy Provision. However, the role of Pharmacy Technician covers both Community Pharmacy Dispensary Technician and Hospital Pharmacy Technician’s scope. The report asked Hospital Pharmacists if the Pharmacy Technician workforce needs to be credentialed, to which the majority agreed that it should be. One of the recommendations in the report was:

“pharmacy technician training models need to be reviewed to consider the role of accredited credentialing programmes and strategies to create engagement.”⁶²

- There is an opportunity to develop a Diploma level qualification to provide a pathway, and possible RPL, into tertiary study. Concerns regarding risk to patients are understandable, however, there is currently a Diploma in Nursing through SM TAFE that allows a pathway into Curtin to become a registered nurse.⁶³ Industry reports that for this to happen licensing issues would need to be resolved as well as award rates.⁶⁴
⁶⁵ Industry reports that the development of a pathway would encourage people to work in the sector, as well as help with retention. By developing a pathway from CP Tech through to Retail Pharmacist providing

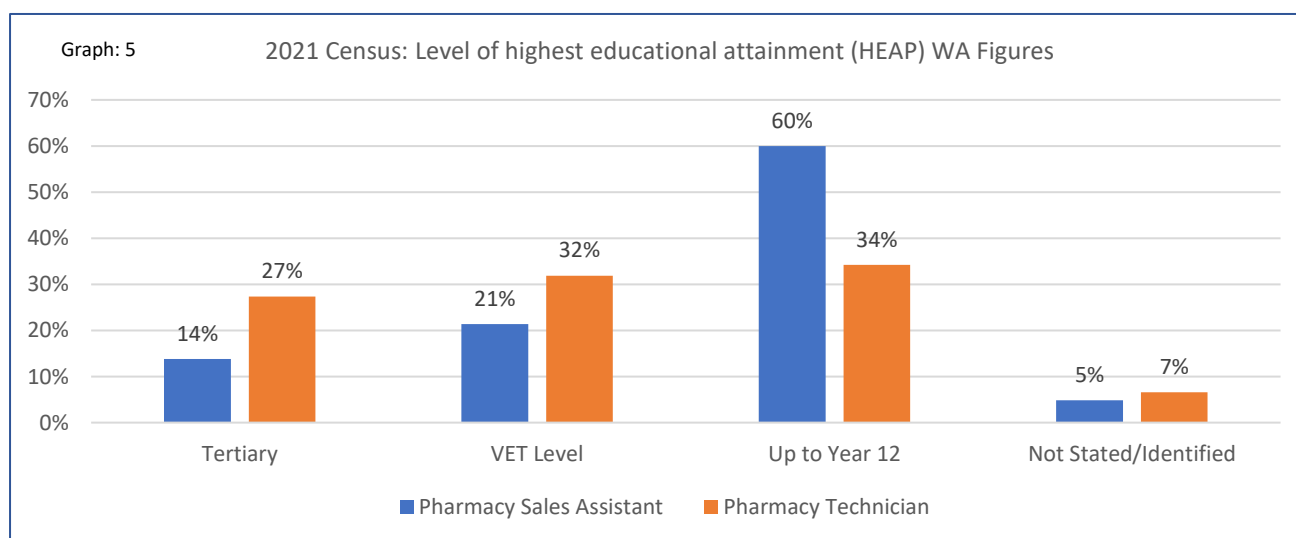
² PRODA is an online authentication system designed for individuals to securely access a number of government programs and services such as Health Professionals Online Services (HPOS)

employees a foundation to start a career on.

- Pharmacists reported an uplift in providing patients with mental health support - (55%) experienced a moderate increase in mental health conversations in the past 12 months, with a further 13% indicating a significant increase.⁶⁶ Training in this area may be beneficial for all occupations within the sector as they are all customer-facing roles.

4.2: Training Challenges/Opportunities existing for Industry within the training sector

- The expansion of traineeships to those already working in Community Pharmacies would encourage staff who are already employed to stay on and upskill.
- Access to training is an issue for regional and rural pharmacies - such as the Kimberley, Pilbara, Mid-West, Southwest, and the Goldfields - as most one-to-one training takes place in Perth.⁶⁷ However, due to COVID, RTOs did improve their training provision through remote learning portals.
- Stakeholders reported other potential training initiatives to alleviate workforce shortages:
 - Higher subsidies for qualifications
 - Financial support for taking on trainees.
 - Skill Sets
 - Micro-credentials
 - Flexible training options for those returning to the workplace.
- Currently, the industry does not support School Based Traineeship (SBT) arrangements as the aligned qualifications must be demonstrated and assessed in a community pharmacy and is too advanced for a young school student.⁶⁸
- Consultations with WA Universities found that there are no pathway options for a Pharmacy Technician to become a qualified Pharmacist. The occupation of Pharmacy Technician, and the aligned VET qualifications, or experience as a Pharmacy Technician, provide no RPL into any accredited tertiary Pharmacy qualification.⁶⁹ This ceiling on career progression may dissuade potential workers from entering the community pharmacy sector - this includes entering at the Pharmacy Sales Assistant Level.⁷⁰
- There are currently no TAFEs delivering Community Pharmacy qualifications in WA. This is due to the requirement that many of the units must be delivered within a working pharmacy. However, TAFE was looking at how they could work with industry to resolve these issues.⁷¹
- Graph 5: University Graduates - According to 2021 Census data approximately 14% of Pharmacy Assistants and 27% of Pharmacy Technicians in WA have a University Graduate or Post-Graduate qualification.⁷² This points to a workforce that may have knowledge and qualifications that would be of benefit to the sector if they were utilized. It also shows that the workforce has a high level of education attainment which, if directed towards potential credentialing/licensing pathways, would create a highly skilled workforce.



- Job Ready Programs - Industry has tried but found that both completion numbers and those taking up

employment post-completion were so low that effort to train meant economically the programs were not viable.⁷³ The industry felt that people did courses without any intention of using that qualification. Industry would reconsider this option if there was a mechanism to ensure post-qualification retention figures.

- Problem with funding for pre-employment. In Retail Pharmacy, you must train in a Pharmacy to get the qualification. So, by default, there is no pre-employment option.⁷⁴
- SIRCIND002 - As mentioned earlier, even though there are no training or license barriers to employment for this occupation the Retail Pharmacy industry has a code of practice based on the Quality Care Pharmacy Program (QCPP).⁷⁵ This is a quality assurance program for community pharmacies that provides support and guidance on professional health services and pharmacy business operations. Today, over 94% of community pharmacies in Australia are QCPP accredited. SIRCIND002 training for all staff is linked to, and a pre-requisite of, QCPP accreditation. This means that you would not be able to work in a customer-facing role in a QCPP accredited Pharmacy without acquiring this qualification. Stakeholders report that due to funding restrictions on the delivery of VET qualifications to international Students (those with 500 VISAs), they are finding it difficult to utilise this large pool of workers - who are also keen to work in the sector.⁷⁶

4.3: VET In Schools Register ⁷⁷

Certificate III in Community Pharmacy

Auspicing advice is High Risk

- Delivery is not supported, due to the skill level and experience required to complete the qualification to an industry standard.
- Schools are generally unlikely to meet the workplace/simulated environment, resource and/or trainer/assessor requirements under an auspicing arrangement.

4.4: Career Pathways and Graduate Outcomes

- Creating clear career paths that allow individuals to progress into more advanced and para-professional roles within the community pharmacy industry would be highly beneficial. This incentive could encourage those interested in pursuing a long-term career in this field. Presently, there are no qualifications for Pharmacy Assistants or Technicians within the SIR training package at Diploma or Advanced Diploma levels. Developing Community Pharmacy qualifications at these levels could open up opportunities for licensed qualifications leading to RPL for tertiary qualifications.
- There are no occupational licensing, certification, or specific legislative requirements to work as a Pharmacy Assistant or Pharmacy Technician. However, the Australian Apprenticeship Pathways AAP suggests the below table as a guide for graduates.⁷⁸

Insert pa	Certificate III		Certificate IV	Diploma	Advanced Diploma
Pharmacy Assistant (Large Pharmacy)	Senior Assistant	Pharmacy	Community Pharmacy Manager	N/A	N/A
Pharmacy Sales Assistant			Community Pharmacy Manager (Small)		
			Senior Pharmacy Assistant		
			Dispensary Technician		

- The industry attracts limited students due to the low visibility for career growth and job progression in the long term as a career choice. The average trainee is around 18-25 years of age with the occasional older trainee⁷⁹.
- Opportunities for new workers to obtain a job in this industry are currently high. The industry is seeking to hire qualified individuals for all levels within community pharmacy including qualified pharmacists, pharmacy dispensary technicians, pharmacy assistants and community pharmacy managers.
- Remuneration across all occupations has been highlighted as an issue with regard to more people entering the industry.

- NCVET Graduate outcomes data for Certificates II & III shows high employment status after training and an extremely high satisfaction rating for the training.

VET student outcomes 2022: qualification completer outcomes by qualification ⁸⁰

Qual'	Responses	Employed or in further study	Improved employment status after training	Commenced further study after training	Satisfied with training	Median salary of those employed in first full-time job after training
CERT II CP	427	90.9	82.8	22	90.4	\$45,900
CERT III CP	187	88.7	76.7	31.8	96.7	\$42,600

5: Your input

- **Why this report?** The WA Government has 8 skills councils to engage stakeholders to advise the State Training Board and the Department of Training and Workforce Development on the training and priorities of industry with particular reference to skills development.
- **Input.** LDSC welcomes input on 08 9388 8781 or <https://www.ldsc.asn.au/contact.html>
- **Industry Advisory Group.** LDSC invites stakeholders to join our Community Pharmacy Industry Advisory Group 08 9388 8781 or <https://www.ldsc.asn.au/contact.html>

6: Industry Consultation

Regular industry consultation is undertaken by the Logistics and Defence Skills Council via Industry Advisory Groups (IAGs), Registered Training Organisations (RTOs), LDSC Annual RTO Forums, LDSCs Board of Management (BoM) meetings, regional consultations, participation in industry advisory committees, teleconferences, email, social media, and the use of online surveys.

Ongoing contact is made throughout the year via emails, newsletters, surveys (our most recent State of the Industry Survey had 89 industry respondents: across all industries under the LDSC remit. This data has also been included in these responses); and other channels by the LDSC to members and non-members of our RTO and IAG networks. Consultation is also maintained through ongoing ad-hoc group and individual meetings throughout the year.

Participating organisations include many small, medium and large companies and organisations within the retail sector across WA. These include local Chambers of Commerce and Industry (CCIs), Industry Associations, Unions, Local and Commonwealth Government Departments, and Regional Development organisations.

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