

Review of Pharmacy Remuneration and Regulation
Submission #12; 17-Aug-2016; Jacquie Tsimbinos

Dear Mr Bill Scott, Ms Jo Watson and Prof Stephen King.

On behalf of Terry White City East I'd like to contribute my thoughts in response to the review.

I have worked as a pharmacist for over 15 years now and as a pharmacy owner for nearly 13 years. During those years I felt I have contributed a lot to the community and I feel proud about that but in recent years have felt less valued by fellow health professionals, government and patients.

The emergence of fierce pricing competition between pharmacies and optional \$1 copay discount has undermined our professional image to the point even I am considering leaving the profession.

Pharmacist wages are appalling and needs to be fixed ASAP. The amount of risk and responsibility with the role is overwhelming but community pharmacists are not remunerated to reflect their roles. Why would someone study for 4 years and accumulate a huge HECS bill only to be paid a little more than a pharmacy assistant?

Pharmacy owners cannot accommodate paying more to pharmacists because they are already struggling to make ends meet each month. The government needs to step up and take responsibility for pharmacist wages. More and more young pharmacists are leaving the profession because they feel they have no future which is very sad.

Consumer experience:

Our pharmacy is a small strip community pharmacy. We only employ 9 people but we manage to achieve a lot considering.

During summer when temperatures soar, we regularly deliver medication to patients who don't have enough support and can't manage to come themselves. The same is true for cold winter months, but we also deliver all year if the need is there. We don't have a delivery car, our staff walk. We are able to report back to the GP if a problem is noticed.

Recently, a male patient was found incoherent so we were able to get medical aid. The outcome was Lithium toxicity so we were able to start a medication pack and monitor his medication use. The outcome was positive.

We do lots of screening at no charge, blood pressure, weight management, blood glucose, and problems can be referred. Recently, we haven't actively encouraged testing because we don't have staff resources or remuneration to cope.

We have to consider what we can afford to do now.

Maybe the government should consider an approval number buyback scheme again?

Sincerely,

Jacquie Tsimbinos
Terry White Chemists ...

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