Medicines and Poisons Act 2019

Extended Practice Authority
'Pharmacists'

Queensland Government

Version control

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Extended Practice Authority - 'Pharmacists'

This extended practice authority (EPA) has been made by the Director-General, Queensland Health, as the chief executive under section 232 of the *Medicines and Poisons Act 2019* (Qld). It states the scope of the regulated activities with the regulated substances which a pharmacist is authorised to carry out for the purposes described in the table under Schedule 9, Part 1 of the Medicines and Poisons (Medicines) Regulation 2021 (Qld).

A term used in this EPA that is defined in the *Medicines and Poisons Act 2019* or the Medicines and Poisons (Medicines) Regulation 2021, has the meaning stated in the *Medicines and Poisons Act 2019* or Medicines and Poisons (Medicines) Regulation 2021.

Part 1 – Vaccinations

Circumstances and conditions

1. A pharmacist who has successfully completed *vaccination training* requirements as detailed in Appendix 1 of this EPA, may administer a medicine listed in Appendix 2, Column 1:
    a. by a route of administration for the medicine as stated in the current online edition of the *Australian Immunisation Handbook*, or as stated in the product information approved by the Therapeutic Goods Administration (TGA); and
    b. subject to the restrictions, if any, for a medicine listed in Appendix 2, Column 2.
2. The pharmacist may administer the medicines only at:
    a. a community pharmacy that meets the requirements in Appendix 3; or
    b. a public sector hospital.
3. Before vaccines are administered, the pharmacist must ensure the equipment and procedures detailed in the current online edition of the *Australian Immunisation Handbook* are in place.
4. Before administering a COVID-19 vaccine, the pharmacist must complete the Australian Government's mandatory COVID-19 vaccination training program.
5. The pharmacist must act in accordance with the requirements for vaccine administration in the current online edition of the *Australian Immunisation Handbook* including patient selection, patient consent, vaccine administration, documenting vaccination and follow up care.
6. When vaccines are in the possession of the pharmacist, the pharmacist must ensure that the storage and transport of vaccines is in accordance with the *National vaccine storage guidelines: Strive for 5*.
7. Before administering a vaccine, the pharmacist must be familiar with the contra-indication(s) and known side effect(s) of the medicine and advise the patient accordingly.
8. The pharmacist must advise a patient if a vaccine they propose to administer is listed in the National Immunisation Program (NIP) Schedule and of the cost to the patient for the vaccine (if any).

9. The pharmacist administering a vaccine must ensure that:
    a. all vaccinations are recorded on the Australian Immunisation Register in accordance with the requirements under the *Australian Immunisation Register Act 2015* (Cth) as soon as practicable and ideally at the time of vaccination; and
    b. any adverse events occurring following immunisation must be notified using the Adverse Event Following Immunisation (AEFI) reporting form available on the Queensland Health website.

Part 2 - Urinary Tract Infection Community Pharmacy Service

Circumstances and conditions

1. A pharmacist who has successfully completed the *Urinary tract infection training* in accordance with Appendix 1 may sell a medicine listed in Appendix 4, Column 1 of this EPA to a female patient aged between 18 and 65 years, without the requirement for a prescription:
    a. subject to the restrictions for the medicine stated opposite in Appendix 4, Column 2 (if any); and
    b. in accordance with relevant professional practice standards for the provision of antibiotics for acute uncomplicated cystitis in females.
2. The pharmacist must maintain eligibility to provide the service, including any ongoing training and registration requirements.
3. The pharmacist may sell the medicines only at a community pharmacy that includes a screened or private consulting area that:
    a. ensures patients' privacy and confidentiality;
    b. has sufficient space to allow the presence of the following:
        - the patient;
        - a carer if necessary;
        - equipment; and
        - documentation; and
    c. has seating for the patient and their carer.
4. The pharmacist must not sell a medicine specified in Appendix 4, Column 1 of this EPA in a quantity that exceeds the smallest available size of the manufacturer's pack of the medicine.
5. The pharmacist must, when selling a medicine under this EPA, keep a clinical record in accordance with relevant legislation and professional responsibilities. This clinical record must include relevant patient health history, problems identified, actions taken (including the name of the medicine if supplied as well as the form, strength and amount), date and details of contact with other healthcare professionals, and the outcomes of any actions taken.
6. The pharmacist is to make available to the patient a copy of the record of the service.

Appendix 1

Vaccination training requirements

Pharmacists must meet both requirements specified in 1 and 2 below.

1. Successful completion of either of the following qualifications:
    a. the training program for the Queensland Pharmacist Immunisation Pilot I and II (QPIP I & II); or
    b. a training program accredited to meet the standards set by the Australian Pharmacy Council's '*Standards for the accreditation of programs to support Pharmacist Administration of vaccines*'.
2. A current Australian recognised qualification:
    a. in first aid, which includes cardiopulmonary resuscitation and anaphylaxis management; or
    b. a current first aid certificate and a current certificate in anaphylaxis management.

Urinary tract infection training requirements

Pharmacists must successfully complete one (or more) of the following training programs that must include learning objectives on classification and epidemiology of urinary tract infections, anatomy, pathogenesis, assessment and differential diagnosis, treatment and the urinary tract infection community pharmacy service:

a. The training program developed for the Urinary Tract Infection Pharmacy Pilot – Queensland; or
b. Training delivered through a higher accreditation institution accredited by the Tertiary Education Quality and Standards Agency; or
c. An accredited continuing professional development program, delivered by a training provider that meets the Australian Pharmacy Council's *Standards for Continuing Professional Development Activities*.

Appendix 2 - Medicines for vaccinations

Vaccinations	
Regulated substance	**Restrictions/Conditions**
Influenza vaccine	As per the recommended doses by age group detailed in the *Australian Immunisation Handbook* or as determined by the Therapeutic Goods Administration (TGA).
Diphtheria-tetanus-acellular pertussis vaccine	Persons aged 16 years or over
Diphtheria-tetanus-acellular pertussis-inactivated poliovirus vaccine	Persons aged 16 years or over
Measles-mumps-rubella vaccine	Persons aged 16 years or over
Cholera vaccine	Persons aged 16 years or over
Haemophilus influenzae type B vaccine	Persons aged 16 years or over
Hepatitis A vaccine	Persons aged 16 years or over
Meningococcal ACWY vaccine	Persons aged 10 years or over
Poliomyelitis vaccine	Persons aged 16 years or over
Pneumococcal vaccine	Persons aged 16 years or over
COVID-19 vaccine[1]	Comply with any limitations in the product information or as determined by the TGA.
Adrenaline in a strength of 0.1% or less - • in a preloaded device such as an autoinjector, or • in an ampoule	For use in treatment of anaphylaxis only.

[1] Only on completion of the Australian Government's mandatory COVID-19 vaccination training program

Appendix 3 - Community pharmacy requirements

A pharmacist undertaking regulated activities at a community pharmacy, must only act under authority of this EPA in a community pharmacy that has the following facilities and resources:

1. A screened or private consulting area that:
    a. ensures patients' privacy and confidentiality;
    b. has sufficient space to allow the presence of the following: the patient; a carer if necessary; the pharmacist administering the vaccine; consumables; equipment; and documentation;
    c. has seating for the patient and their carer during the vaccination; and
    d. has sufficient space and appropriate surfaces for the patient to lie down in the event of an adverse reaction; and for staff to safely perform resuscitation procedures.
2. An area with seating that provides for direct visual observation where patients can wait for at least 15 minutes following the vaccination.
3. Hand washing facilities/hand sanitising products available to allow for the performance of appropriate hand hygiene before and after vaccine administration.
4. Enough appropriately trained pharmacy staff to ensure patients' safety during post-vaccination monitoring and any adverse event management. Ideally the pharmacy will have two pharmacists available at any one time – one to act as the dedicated vaccinator and the other to manage the general business of the dispensary.
5. Pharmacies with only one pharmacist on duty must assess their workflows to ensure they are able to provide uninterrupted care to an individual patient when vaccinating and have staff on-site with current training in first aid (including cardiopulmonary resuscitation and management of anaphylaxis) that can assist in providing after-vaccination care or managing an emergency.

Appendix 4: Medicines for Urinary Tract Infection Community Pharmacy Service

Medicines for Urinary Tract Infection Community Pharmacy Service	
Scheduled substance	**Restrictions/Conditions**
Trimethoprim	
Nitrofurantoin	Sale and supply limited to circumstances where trimethoprim is not appropriate for the patient
Cefalexin	Sale and supply limited to circumstances where trimethoprim and nitrofurantoin are not appropriate for the patient