

# Submission to the Pharmacy Board of Australia

# Consultation on common guidelines and code



# **Purpose**

The Pharmaceutical Society of Australia (PSA) makes this submission to the Pharmacy Board of Australia (the 'Board') in relation to the consultation on the following common guidelines and code:

- revised Guidelines for advertising;
- revised Code of conduct;
- proposed draft Social media policy; and
- revised Guidelines for mandatory notifications.

This submission makes reference to the following PSA documents which have been included as attachments:

- Code of ethics for pharmacists (PSA, 2011); and
- Guidance for pharmacists on contributing to and using the internet or social media (PSA, 2011).

PSA's submission outlines a summary of key recommendations, then provides general comments on each of the four consultation documents. The section on specific comments provides suggested changes or feedback on identified sections of each document. The attachments mentioned above can be found at the end of this submission.

# **Key recommendations**

# Guidelines for advertising

PSA supports the revised guidelines which include considered explanations and relevant examples.

PSA would advocate for the Board to regularly communicate with pharmacists about correct interpretations of advertising rules.

PSA would welcome further work to be undertaken by the Board around informing pharmacists about the restrictions on the use of the term "specialist" and to promote a phasing out of the inclusion of the term in employment awards.

# Code of conduct for the pharmacy profession

PSA recommends the inclusion of codes of ethics relevant to pharmacists' practice and endorsed by the Board as appendices in the Board's Code of conduct for registered health practitioners to supplement profession-specific information and advice.

PSA believes the Board's code of conduct should be strengthened in relation to pharmacists' obligations around third party access to data collected in the pharmacy.

# Social media policy

PSA is generally supportive of the new social media policy.

PSA recommends that comprehensive guidance on the use of social media should be consolidated into a single document when next considered for review.

#### Guidelines for mandatory notifications

PSA supports the suggested modifications to the guidelines.

PSA recommends that consumers and carers are provided with user-friendly information about all forms of notification and a summary of the steps to assist if they wish to lodge complaints about health practitioners.

# **General comments**

# Guidelines for advertising regulated health services

PSA believes one of the challenging aspects in complying with advertising rules is that, for pharmacists, there are many aspects of advertising that they need to be aware of. Apart from the Board's advertising guidelines for health practitioners, pharmacists also need to be cognisant of and comply with advertising restrictions which apply to therapeutic goods and price information, and fair trading and consumer protection laws.

The proposed amendments to the guidelines are reasonably comprehensive and PSA supports the inclusion of clearer explanations, relevant and useful examples, and practical guidance. We agree that specific examples will not cover every scenario and therefore PSA would advocate for the Board to regularly communicate with pharmacists about appropriate interpretations of advertising rules. To this end, we would encourage the use of a range of examples as practitioners often learn more from real-life scenarios rather than just a detailed explanation of the rules.

# Code of conduct for registered health practitioners

# Code of ethics for pharmacists

PSA is generally supportive of the proposed amendments which are outlined in the draft revised code. However, PSA would also take this opportunity to re-iterate its firm view that the code of conduct relevant to the pharmacy profession should include PSA's *Code of ethics for pharmacists* in full.

The consultation document states that the common code of conduct "seeks to help and support registered health practitioners to deliver effective health services within an ethical framework". To provide an ethical framework which is comprehensive and appropriate from the pharmacy profession's perspective, PSA believes it is important for readers of the document to be able to see important and unique aspects side by side with the general code and in full, possibly as an appendix.

PSA's code of ethics has been accepted widely by the profession and is also being referred to by consumers, other health professions, government, regulators and the media. While the overarching code provides a common, solid base for all registerable health professions, PSA's code contextualises several profession-specific issues. This connection is vital for all members of the pharmacy profession and provides a clearer, comprehensive picture for other stakeholders and the public. This cannot be achieved satisfactorily simply by including hyperlinks or citations. We believe inclusion of PSA's code of ethics, in full, will also assist pharmacists to better scrutinise their responsibilities and to meet their obligations.

PSA would ask that the Board reconsider the proposal to continue the practice of only including references to other codes of ethics relevant to the pharmacy profession.

# Ethics advisory service

The Board would be aware that PSA recently established an ethics advisory service which is currently being piloted. This is a new confidential service open to all PSA members, designed to assist and support those who are facing ethical dilemmas in their professional practice.

PSA responded to feedback from members who identified the need for this type of service. PSA developed the service in consultation with other key pharmacy stakeholders and was cognisant of the need to ensure this did not interfere with the operation of other similar services. In particular, any person lodging an enquiry or complaint must declare that they understand the use of PSA's service does not replace any obligation they have under the National Law, for example, in relation to mandatory notifications.

# Release of data to third parties

The code of conduct includes a statement (under section 1.1) that it does not address in detail the range of general legal obligations that apply to practitioners, such as those under privacy legislation. Nevertheless there is appropriate inclusion of several clauses which relate to practitioners' obligations in "protecting the privacy and right to confidentiality of patients or clients, unless release of information is required by law or by public interest considerations".

Even though the pharmacy profession has been highly computerised for many decades, pharmacists are being introduced to new IT-based initiatives which are constantly being developed in the health care space. Some pharmacists have raised concerns with PSA about the increasing availability of programs in the pharmacy which have data collection functionalities embedded and the contents of which are allegedly being accessed by third parties. The types of data being collected may, for example, be patient-related or medicine-specific. While access to such data by a third party may be done in a de-identified manner, PSA is concerned that pharmacists may believe that such data are required by law or by public interest considerations and therefore may not be seeking consent from consumers when in fact this may be needed. We believe this aspect should be strengthened within the Board's code of conduct.

# Social media policy

In response to the increase in use of the internet and social media broadly, PSA issued guidance for pharmacists in 2011 to provide some context in relation to health information and professional responsibilities for pharmacists. The PSA document provides overarching general guidance and in many areas, re-iterates principles and issues which are already articulated in the PSA's code of ethics and the Board's code of conduct.

PSA supports the Board's new social media policy and notes that information in the PSA guidance document complements the policy.

PSA recognises that the introduction of guidance by the Board on the use of social media has necessitated changes to also be made to two other documents (the code of conduct and the advertising guidelines). However it is somewhat cumbersome to have to refer to multiple documents in order to access comprehensive guidance on a single issue. PSA would therefore recommend that information could be consolidated into a single document once practitioners become familiarised with the new social media policy.

# **Guidelines for mandatory notifications**

At the time of establishment of the national registration and accreditation scheme, PSA was generally supportive of mandatory notifications but did also express some concerns. This was around PSA's desire to ensure a process that encouraged practitioners to seek early peer or medical support, when necessary, without fear of immediate mandatory reporting and to allow other practitioners, colleagues and employers to provide or support remedial action without being penalised.

PSA acknowledges that the initial guidelines (prior to the current revisions) contained considered information to explain the requirements and obligations of practitioners to make mandatory notifications, and also outlined provisions intended to protect people who make notifications in good faith.

Mandatory notification was a new requirement for practitioners at the commencement of the scheme and PSA was aware that many pharmacists felt uncertain about how this would translate in practice. Of the 775 mandatory notifications received by AHPRA in 2011/12, PSA notes that only 31 cases related to pharmacists, representing 11.3 cases per 10,000 practitioners (compared to an average of 13.3 cases per 10,000 across all ten health professions). Further, PSA has not received any information from pharmacists about any significant concerns or queries on mandatory notification over the last several years. This is consistent with the consultation paper reporting that only a small number of issues have been raised about the guidelines since they commenced.

Overall, PSA believes that the guidelines have been appropriate and adequate and also support the suggested modifications which aim to provide clarification of several issues.

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<sup>&</sup>lt;sup>1</sup> Australian Health Practitioner Regulation Agency. Annual report 2011/12. p. 93.

# **Specific comments**

PSA comments which relate to specific sections or text in the consultation documents are outlined below.

	Section / Heading	Comment	
Guidelines for advertising			
1	8.1 Social media	PSA understands the intent of the requirement for practitioners to be held responsible for any comments about themselves posted on a third party site. However, with regards to the removal of any inappropriate material from a third party site, we are concerned that there may be instances when this is difficult despite genuine attempts by the practitioner. It may be appropriate therefore to include in this section, the words "to the best of their ability" or similar.	
2	8.2.2 Advertising specialties and endorsements	PSA believes that the provisions around the use of the title "specialist" are still not well understood by pharmacists. PSA would support a profession-wide communication from the Board regarding this matter.	
		Further, we believe that the issue is somewhat complicated by the inclusion of the term "specialist" in some employment awards as job or position titles. PSA believes a gradual transition to phase out the inappropriate use of such titles would be desirable.	
Code of conduct			
3	3.15 Closing or relocating a practice	PSA believes this section could apply similarly to situations where there is a change in ownership of a community pharmacy or other type of practice. We suggest that explicit mention of this example should be included in the opening sentence of this section.	
Social media policy			
4	Definition of social media (also applies to the Guidelines for advertising and Code of conduct)	An issue that is becoming more apparent globally is the demarcation between personal and private lives. We note that the definition in the policy includes professional and personal pages and comments. We believe this may be seen to be stretching the boundaries of privacy if the provisions of the code are being applied to a practitioner's personal page.	
5	Obligations in relation to social media	The policy advises practitioners to be aware of their obligations under the National Law as well as "other relevant legislation". PSA believes it may be necessary to reinforce that social media operate in an international medium and therefore are covered by the laws in each country where the content is accessible. Information about people, products or services may be permissible in one country but not another, and therefore additional caution may be warranted.	

#### Guidelines for mandatory notifications

6 Last sentence before the heading "What is 'the public'?"

Where a practitioner is told about notifiable conduct that another practitioner or patient has directly experienced or observed, the person with most direct knowledge about the notifiable conduct should be encouraged to make a notification themselves.

While the above guidance represents a logical course of action in the context of the National Law, PSA believes it would be a difficult step to take for many patients. Pharmacists do encounter situations when a patient may raise certain concerns about their interaction with a health practitioner but are often reluctant to formalise any 'complaint'. PSA believes that a concerted effort is required to raise awareness about all forms of notification with consumers and carers, including their own role.

# **Attachments**

- Code of ethics for pharmacists (Pharmaceutical Society of Australia, 2011)
- Guidance for pharmacists on contributing to and using the internet or social media (Pharmaceutical Society of Australia, 2011)

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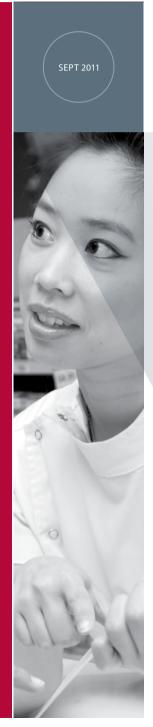
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# **Code of Ethics for Pharmacists**





# **CODE OF ETHICS FOR PHARMACISTS**

# **Background**

The Pharmaceutical Society of Australia's Code of Professional Conduct (from 1998) has been revised to reflect:

- changes in legislation, changes to the health care landscape and evolution of professional pharmacy practice;
- the implementation of national registration for pharmacists including the overarching <u>Code of</u> <u>Conduct for Registered Health Practitioners;</u>
- the reviews and subsequent release of PSA's
   <u>Professional Practice Standards</u> and the pharmacy profession's <u>National Competency Standards</u>
   <u>Framework for Pharmacists in Australia 2010</u>; and
- consistency with contemporary pharmacy practice in Australia.

The review and revision of the previous Code was conducted through a rigorous, multi-stage process involving: the PSA Board and Branches; a Code Review Working Group and panel of Expert

Pharmacists nominated by PSA Branches; PSA members; and external stakeholders including pharmacy, consumer and other health professional organisations and government bodies. The revised code will be known as the PSA Code of Ethics for Pharmacists (the 'PSA Code').

#### Status of this Code

All pharmacists registered with the Pharmacy Board of Australia (PBA) under the National Registration and Accreditation Scheme need to comply with a common code of conduct that applies to all registered health practitioners. The *Code of Conduct for Registered Health Practitioners* provides guidance on the ethical framework through which effective health services should be delivered. It contains important standards for practitioner behaviour on: working professionally with all members of the health care team and system; sharing decision-making and providing good care in a professional and ethical manner; minimising risk;

ensuring healthy and competent professionals; and contributing to the development of other health practitioners.

The PBA has indicated that the PSA Code would be implemented as the pharmacy profession-specific code in addition to the overarching code for registered health practitioners. The PSA Code will, most likely, form an appendix to the health practitioners' code. The PBA, in its role of public protection, may use or refer to the PSA Code in cases involving the conduct or behaviour of pharmacists.

# Purpose and scope of this Code

The PSA Code must be read in conjunction with other relevant documents such as: Federal and state/territory legislation; standards, codes and guidelines issued by the PBA; and guidelines and standards issued by professional organisations. Nothing in the PSA Code is to be construed as permitting breach of any law, or interpreted in any way which would discourage any pharmacist from complying with any legal obligation.

The PSA Code articulates the values of the pharmacy profession and expected standards of behaviour of pharmacists to consumers and society. It is designed to guide and support professional practice of all pharmacists. Note that the PBA's definition of "practice" (adapted below) applies here.

To practise as a pharmacist means undertaking any role, whether remunerated or not, in which the individual uses their skills and knowledge as a pharmacist. Practice is not restricted to the provision of direct clinical care. It also includes working in a direct nonclinical relationship with consumers; working in management, administration, education, research, advisory, regulatory or policy development roles; and any other roles that impact on safe, effective delivery of services in the profession and/or use their professional skills.

#### Structure and content of this Code

The PSA Code consists of nine principles covering five main areas of focus which are core to pharmacists and pharmacy practice. The principles capture philosophical concepts and form the foundation of the Code.

The Summary of Principles (p. 4) provides an overview of the entire Code, the nine principles aligned to areas of focus, and sub-text supporting each principle. The areas of focus associated with

the principles are intended to promote a better understanding of the context and application of the principles to everyday practice. Although the principles are numbered and associated with a specific area of focus, they are of equal importance.

Following the Summary of Principles, the main section of the document further articulates each of the principles. A set of more detailed statements (Obligations) outline the standards of professional behaviour expected of a pharmacist.

Where warranted, the PSA Code will also be supported by separate documents providing additional detail and which can be updated as required. These will be referenced in the *Additional quidance* section.

# **Application of this Code**

The principles contained in this Code apply to every pharmacist irrespective of the role, scope, level or location of practice. Clearly there will be instances where some principles may not be directly relevant to an individual pharmacist's usual practice, for example, where the area of focus is on business practices. However, it is expected that all pharmacists will embrace the underlying tenet of each principle and be responsible for propagating the profession's core values.

Intern pharmacists and pharmacy students will be exposed to the PSA Code and learn about various 'codes' of ethics relevant to their chosen profession. It is expected that intern pharmacists and pharmacy students comply with the PSA Code during periods of supervised practice (clinical placements).

All non-pharmacist personnel engaged in the pharmacy profession are strongly encouraged to comply with the principles of the PSA Code. Employers are encouraged to include the PSA Code as part of the employee induction process and regularly promote aspects of the Code. This will enhance rigour and promote confidence in the profession.

#### Additional guidance

The PSA will provide additional guidance to pharmacists on an ongoing basis to cover specific principles, areas of practice or issues as they arise or are identified. These may be provided as points or referenced (if substantial documents) in the *Additional guidance* section.

# CODE OF ETHICS FOR PHARMACISTS – SUMMARY OF PRINCIPLES

AREA OF FOCUS	PRINCIPLE AND SUPPORTING TEXT
THE CONSUMER	<ol> <li>A pharmacist recognises the health and wellbeing of the consumer as their first priority.         A pharmacist will utilise expert knowledge and provide care in a compassionate and professional manner.     </li> <li>A pharmacist pays due respect for the autonomy and rights of consumers and encourages consumers to actively participate in decision-making.         A pharmacist will, through informed consent, pay due respect to the dignity and privacy of the consumer including: respecting the consumer's individuality; respecting their right to refuse advice or treatment; and ensuring the privacy and confidentiality of the consumer and information provided.     </li> </ol>
THE COMMUNITY	3. A pharmacist upholds the reputation and public trust of the profession.  A pharmacist will not abuse the trust and respect of individuals and society.  4. A pharmacist acknowledges the professional roles in and responsibilities to the wider community.  A pharmacist will ensure responsible and accountable control and supply of therapeutic goods and contribute to public health and enhancing the quality use of medicines.
THE PHARMACY PROFESSION	<ul> <li>5. A pharmacist demonstrates a commitment to the development and enhancement of the profession. A pharmacist will commit to advancing the profession through involvement in activities including: training staff; engaging in teaching; acting as a preceptor; mentoring students, interns and colleagues; engaging in discussions and participating in initiatives to develop the profession; and showing professional leadership.</li> <li>6. A pharmacist maintains a contemporary knowledge of pharmacy practice and ensures health and competence to practise.</li> <li>A pharmacist will recognise the importance of lifelong learning and self-development and their impact on professional competence. Further, a pharmacist is responsible for ensuring personal health to practise and supporting health professional colleagues in this regard.</li> <li>7. A pharmacist agrees to practise only under conditions which uphold the professional independence, judgement and integrity of themselves or others.</li> <li>A pharmacist will exercise professional autonomy, objectivity and independence and manage actual and potential situations of conflict of interest.</li> </ul>
BUSINESS PRACTICES	8. A pharmacist conducts the business of pharmacy in an ethical and professional manner.  A pharmacist will ensure business practices are conducted primarily in the best interest of the consumer, paying due respect to colleagues, while upholding the reputation of the profession.
OTHER HEALTH CARE PROFESSIONALS	9. A pharmacist works collaboratively with other health professionals to optimise the health outcomes of consumers.  A pharmacist will consult and work cooperatively with other health care professionals to achieve expected or optimal health outcomes for the consumer.

# PRINCIPLES, OBLIGATIONS AND ADDITIONAL GUIDANCE

In this section, each Principle is further articulated through Obligation statements which outline the standards of professional behaviour expected of a pharmacist. In addition, points to guide the application of the PSA Code to everyday practice are provided. This *Additional guidance* section will be developed further over time as issues arise or are identified.

# **Principle 1 – Consumer First Priority**

A pharmacist recognises the health and wellbeing of the consumer as their first priority.

It is important to reiterate that this principle applies to all pharmacists, even when not involved in providing direct care to consumers.

#### **OBLIGATIONS**

A pharmacist must:

- 1.1 Consider their duty of care to the consumer first and foremost.
- 1.2 Utilise expert knowledge and provide care in a compassionate and professional manner.
- Recognise consumers who are particularly vulnerable and tailor the provision of care accordingly.
- 1.4 Act to prevent harm to the consumer.
- 1.5 Promote good health and wellbeing.

- When recommending a therapeutic product, any new evidence or lack of rigorous information must be carefully balanced with the consumer's choice and health status.
- Professional judgement must be exercised to prevent the supply of products likely to constitute an unacceptable hazard to health or the supply of unnecessary and/or excessive quantities of medicines or products, particularly those which have a potential for abuse or dependency.
- It is important to ensure consumers understand both risks and benefits associated with the chosen options of medication management and care. Clear directions and contacts should be provided for actions to be taken in the event of an adverse event or outcome.
- As the consumer's health care management may extend over more than one health/pharmacy sector/provider, it is important that pharmacists consider their liaison role and appropriately facilitate continuity of care for the consumer.

# **Principle 2 – Informed Consent**

A pharmacist pays due respect for the autonomy and rights of consumers and encourages consumers to actively participate in decision-making.

Participation by consumers in health care decisions is a core principle of the Australian Charter of Healthcare Rights. Consumers have the right to be informed about the choices available in health care and to be involved in making decisions based on these choices. Optimal health outcomes will depend on consumers being made aware of available options and expected outcomes (both positive and negative).

#### **OBLIGATIONS**

#### A pharmacist must:

- 2.1 Respect the dignity of the consumer.
- 2.2 Recognise and respect consumer diversity, culture, beliefs, values and characteristics, and not discriminate on any grounds.
- 2.3 Through informed consent, encourage consumers to participate in shared decision-making and assist by providing information and advice relevant to the consumer's clinical needs in appropriate language and detail.
- 2.4 Respect the consumer's choice including the right to refuse treatment, care or advice, or to withdraw consent at any time.
- 2.5 Ensure compliance with the consumer's right to privacy.
- 2.6 Ensure confidentiality of the consumer's information.

- Informed consent is based on provision of sufficient information to enable the consumer to make an informed decision about the medication or service. Coercion or lack of transparency are unacceptable.
- Provision of information must be tailored to the consumer's needs and purpose and in non-judgemental language.
- The consumer has a right to be offered and to acquire all relevant information regarding their medication. However there may be exceptions to this consumer right; any legislative requirements and professional privilege represent two examples.
- Protecting the consumer's right to privacy and confidentiality
  must occur not only in any interaction with the consumer but
  also in all communication between health practitioners regarding
  the consumer.
- A pharmacist has a right to decline provision of care based on a
  conscientious objection. However, this right should not prevent
  the consumer from accessing health care that they are entitled to.
  Therefore in these circumstances the pharmacist should inform the
  consumer of the objection and appropriately facilitate continuity of
  care for the consumer.
- Australian Commission on Safety and Quality in Health Care. Australian Charter of Healthcare Rights.

# **Principle 3 – Public Trust**

#### A pharmacist upholds the reputation and public trust of the profession.

Pharmacists are regarded as role models and are granted certain professional privileges. In return, individual members of the community and the whole of society expect professional behaviour which warrants trust and respect.

#### **OBLIGATIONS**

#### A pharmacist must:

- Demonstrate accepted standards of professional and personal behaviour.
- 3.2 Respect the trust that individuals and society place in the profession.
- 3.3 Provide accurate, truthful, relevant and independent information in a form that is appropriate for and not misleading to consumers.

#### ADDITIONAL GUIDANCE

- Consumers place a high level of trust in pharmacists and expect sound and objective advice. Pharmacists should ensure they and their staff are not susceptible to inappropriate marketing influence that may adversely impact on their primary obligation to provide the most appropriate product, care or advice to meet consumer needs.
- Pharmacists should carefully consider how information provided to consumers has been received and interpreted. Information provided should not exploit a person's lack of knowledge or understanding.

# **Principle 4 – Quality Use of Medicines**

#### A pharmacist acknowledges the professional roles in and responsibilities to the wider community.

Pharmacists commit to responsible and accountable control and supply of therapeutic goods and to contribute to public health and enhancing the quality use of medicines in partnership with individuals and the wider community. All aspects of pharmacy practice are underpinned by quality use of medicines principles and evidence-based practice.

## **OBLIGATIONS**

#### A pharmacist must:

- 4.1 Ensure responsibility and accountability in the control, procurement, manufacture, handling and supply of therapeutic goods.
- 4.2 Promote the roles and responsibilities of pharmacists to the community.
- 4.3 Consider the use of and access to health resources in a fair and equitable manner.

- All reasonable care must be taken when disposing of medicinal products and chemicals. Medicines awaiting disposal must be securely stored.
- Timely reporting of suspected adverse events or reactions to therapeutic goods is also a professional responsibility and expectation.
- Pharmacists must be cognisant of the nature and level of responsibility the community expects of the pharmacy profession.
- Pharmacists have a responsibility to contribute to the achievement
  of the objectives of Australia's <u>National Medicines Policy</u> which are:
  timely access to the medicines that Australians need, at a cost
  individuals and the community can afford; medicines meeting
  appropriate standards of quality, safety and efficacy; quality use of
  medicines; and maintaining a responsible and viable medicines
  industry.

# **Principle 5 – Enhance the Profession**

#### A pharmacist demonstrates a commitment to the development and enhancement of the profession.

All members of a respected and privileged profession have a role in the development, advancement and evolution of that profession. There are a range of activities and opportunities available to fulfil this responsibility which pharmacists may undertake to different extents at different stages of a professional career.

#### **OBLIGATIONS**

#### A pharmacist must:

- 5.1 Commit to advancing the profession through involvement in appropriate activities.
- 5.2 Encourage and support the ongoing development of staff and colleagues.

#### **ADDITIONAL GUIDANCE**

- Examples of activities to be involved in include: professional development and training of staff; engaging in teaching; acting as a preceptor; mentoring students, interns and colleagues; engaging in discussions and participating in initiatives to develop the profession; developing and promoting professional roles and responsibilities to consumers, other health professionals and governments; and showing professional leadership.
- A preceptor pharmacist must act as a role model and actively engage in teaching and mentoring intern pharmacists and pharmacy students, not leaving these responsibilities solely to other staff members.
- A preceptor pharmacist must not compromise or manipulate time, effort or vulnerability of intern pharmacists.
- A preceptor pharmacist must demonstrate fairness in the interaction between preceptor and intern, and in the allocation of learning opportunities.

# **Principle 6 – Lifelong Learning**

A pharmacist maintains a contemporary knowledge of pharmacy practice and ensures health and competence to practise.

All pharmacists should understand and accept the concept of lifelong learning and must commit to continuous learning and professional development as a means of advancing their practice and professional role in the community. Pharmacists also have a responsibility to identify impairment and ways to address the issues and seek or provide support.

## **OBLIGATIONS**

### A pharmacist must:

- 6.1 Recognise the importance of lifelong learning and selfdevelopment and their impact on professional competence, and commit to this concept in their current role, responsibility and scope of practice.
- 6.2 Recognise the benefits of self-assessment, or appraisal or review by others, of professional performance and respond appropriately to the outcomes.
- 6.3 Be responsible for ensuring personal health to practise and supporting health professional colleagues in this regard.
- 6.4 Recognise signs and behaviour in self and colleagues which may indicate a need for intervention in professional practice and referral for advice and support.

- Pharmacy Board of Australia. <u>Guidelines</u> on continuing professional development.
   1 July 2010.
- Pharmacy Board of Australia. <u>Guidelines</u> <u>for mandatory notifications</u>. 1 July 2010.

# **Principle 7 – Professional Accountability**

A pharmacist agrees to practise only under conditions which uphold the professional independence, judgement and integrity of themselves or others.

A pharmacist is responsible for the professional decisions and contributions he or she makes in professional practice. Most practice settings involve working as part of a health care team which involves a pharmacist: working alongside professional pharmacist colleagues; supervising and being accountable for interns, students and support staff; or reporting to managers. Professional service delivery depends on successful team work derived from respect, good communication and cooperation.

#### **OBLIGATIONS**

#### A pharmacist must:

- 7.1 Exercise professional autonomy, objectivity and independence, and manage actual and potential situations of conflict of interest.
- 7.2 Behave in a manner which makes it clear that he or she is responsible and accountable for all decisions made and actions taken in professional practice.
- 7.3 Communicate with team members regarding each person's sphere of responsibility and line of reporting.
- 7.4 Ensure that the working environment and conditions are conducive to the optimal delivery of health care services and do not present a risk to the safety and care of consumers or colleagues.

- A pharmacist must not override the professional autonomy of pharmacists in his or her employ unless consumer safety may be compromised.
- It is advisable to refuse employment where a pharmacist's professional autonomy or judgement is denied or integrity is compromised in any way.
- Pharmacists engaged in research must appropriately consider responsible research practices and research ethics principles including any declaration or disclosure of interests (eg. grants from industry or shareholdings).
- National Health and Medical Research Council, the Australian Research Council and Universities Australia. <u>Australian code for the responsible conduct of research</u>. 2007.
- National Health and Medical Research Council, the Australian Research Council and Australian Vice-Chancellors' Committee.
   National statement on ethical conduct in human research. Updated September 2009.
- Pharmacists who employ other health practitioners should sight and authenticate credentials and be confident the activities and services provided complement the role of the pharmacist. The pharmacist shall maintain the professional role in the provision of quality use of medicines, dispensing of medications and counselling.
- Pharmacists are responsible for actions of staff under their supervision and arrangements must be made to ensure appropriate professional indemnity insurance coverage.
- It is recognised that sub-optimal working conditions may be unavoidable in some emergency situations (eg. following floods, fires or cyclones). Pharmacists should make their best efforts to safeguard consumers and colleagues under such circumstances.

# **Principle 8 – Ethical Business Practices**

#### A pharmacist conducts the business of pharmacy in an ethical and professional manner.

Pharmacists are part of a diverse profession where contribution to health care service delivery occurs in many ways and through a variety of settings. In many cases, the contribution of professional expertise occurs in a health care setting involving business practices.

#### **OBLIGATIONS**

A pharmacist must:

- 8.1 Ensure business practices are conducted primarily in the best interest of the consumer.
- 8.2 Consider and recognise when potential conflicts of interest should be declared.

- Examples of 'pharmacy health care service' models include (but are not limited to): operating a hospital pharmacy department; running a community pharmacy in a retail environment; or providing a consultant pharmacist service through the delivery of Home Medicines Reviews.
- The premises or location from which pharmacy health care services are delivered to consumers should reflect the professional character and health-related nature of the profession.
- When considering service or product availability from a pharmacy, the pharmacist will need to carefully balance issues such as consumer demand and commercial factors with quality, safety and efficacy.
- Vigilance over business practices may be particularly warranted by pharmacists in community pharmacies due to their existence in the retail environment where factors such as competitive prices and volume are key business drivers.
- Irrespective of the setting or model through which pharmacists practise, it is important to reiterate that the consumer's interests are always paramount while recognising the duality of interest of a pharmacist who may conduct a pharmacy business in the provision of a health care service.
- Parameters which guide any competitive marketing of therapeutic goods or health care services are: having the best interest of the consumer (Principle 1); upholding the reputation of the profession (Principle 3); and respecting colleagues (Principles 7 and 9).
- A pharmacist must refrain from inappropriate advertising, cognisant of the fact that pharmacy is a health care profession.
- Pharmacy Board of Australia. <u>Guidelines for advertising of regulated</u> <u>health services</u>. 1 July 2010.
- Therapeutic Goods Advertising Code 2007 provides that the marketing and advertising of therapeutic goods to consumers is conducted in a manner that promotes the quality use of therapeutic goods, is socially responsible and does not mislead or deceive the consumer.

# **Principle 9 - Collaboration**

A pharmacist works collaboratively with other health professionals to optimise the health outcomes of consumers.

The provision of care by means of multidisciplinary teams aims to produce synergies and efficiencies through the contribution of respective health professional skills and expertise. Collaborative care implemented through good communication and cooperation can deliver enhanced efficiencies and better health outcomes for consumers, particularly in the context of an increasing demand for and complexity of health care.

#### **OBLIGATIONS**

#### A pharmacist must:

- 9.1 Exercise professional independence and judgement and be cognisant of own scope of professional practice when providing support and advice to other health professionals.
- 9.2 Respect and understand the expertise of other health professionals.
- 9.3 Consult and work cooperatively with other health professionals to achieve expected health outcomes for the consumer.
- 9.4 Establish good working relationships and promote agreed communication paths with other health professionals to enable the delivery of best possible outcomes.

- A pharmacist must ensure no conflict of interest encroaches on the relationship with any other health care provider (eg. sharing of financial gain from a referral or sale of a product or medication).
- A pharmacist must at all times refrain from expressing defamatory or unprofessional complimentary remarks in public about any consumers, colleagues or other health care providers.
- Working within your own scope of pharmacy practice and recognising the expertise of others should also facilitate appropriate referral processes thereby enhancing the multidisciplinary approach to optimising health outcomes for consumers.

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# Guidance for Pharmacists on Contributing to and Using the Internet or Social Media

The internet and social media have changed the way many people receive or seek information about health issues and health care. Consequently, there is an added responsibility on health professionals using these media to ensure accuracy, relevance of information and confidentiality of patient details.

Pharmacists using the internet and social media for professional purposes need to create and maintain an environment of trusted relationships to assure high-quality information and services, protect confidentiality, and enhance the value of the internet and social media for both consumers and providers of health information, products, and services.

This guidance document is designed to help ensure that pharmacists and consumers can confidently, and with understanding of known risks, use the internet and social media in disseminating and receiving information about health and health-care issues.

Because health information, products and services have the potential to improve health and to do harm, pharmacists providing health information on the internet or via social media have obligations to adhere to standards of best practice for online professional services in health care.

Consumers who use internet health sites and social media services also have a responsibility to help assure the value and integrity of the internet by exercising judgment in using sites, products and services, and by providing meaningful feedback about online health information, products and services.

For the purposes of this document, health information from pharmacists is deemed to include information on maintaining good health, preventing and managing disease, and making other decisions related to health and health care. It includes information for making decisions about health products and health services, it may be in the form of data, text, audio, and/or video; and it may involve enhancements through interactivity.

# **Guiding Principles**

At all times, any activities involving social media or the internet must comply with the Pharmacy Board of Australia's Code of Conduct for Registered Health Practitioners (available <a href="here">here</a>) as well as the PSA <a href="here">Code of Ethics</a>.

People who use the internet and social media for health-related purposes need to be confident that the sites they visit and services they use are credible and trustworthy. Sites should clearly indicate:

- who owns or has a significant financial interest in them;
- what the purpose of the site or service is eg. purely educational, promoting the sale of health products or services, or offering personal medical care or advice; and
- any relationship (financial, professional, personal, or other) that would likely influence a person's perception of the information, products, or services offered by the site

# **Honesty**

Consumers who seek health information on the internet or social media need to know that products or services are described truthfully and that information they receive is not presented in a misleading way,

- in all content used to promote the sale of health products or services
- in any claims about the efficacy, performance, or benefits of products or services

They should clearly distinguish content intended to promote or sell a product, service, or organisation from educational or scientific content.

# Quality

To make informed decisions about their health care, consumers need to expect that sites provide accurate, well-supported information and products and services of high quality. Pharmacists should therefore:

- evaluate information rigorously and fairly;
- provide information that is consistent with the best available evidence;
- assure that when personalised medical care or advice is provided that care or advice is given by the appropriate person; and
- indicate clearly if information is based on scientific studies, expert consensus, or professional or personal experience or opinion

# Information

Information and services must be easy for consumers to understand and use. Sites should present information and describe products or services:

- in a clear, easy to read format
- in a way that accommodates special needs users may have

Sites that provide information primarily for educational or scientific purposes should guarantee the independence of their editorial policy and practices by assuring that only the site's content editor determines editorial content and has the authority to reject advertising that they believe is inappropriate.

Consumers have a right to expect that the information they receive is up to date. Sites should clearly indicate:

- when the information was first published on the when the site most recently reviewed the information; and
- whether the site has made substantive changes in the information and if so, when the information was most recently updated.

Consumers need to be able to judge for themselves the quality of the health information they find on the Internet. Sites should describe clearly and accurately how content is developed for the site by telling users:

- what sources the site or content provider has used, with references or links to those sources: and
- how the site evaluates content and what criteria are used to evaluate content
- When health products or services are subject to government regulation, sites should tell users whether those products (such as drugs or medical devices) have been approved by appropriate regulatory agencies, such as the TGA.

### **Professionalism in Online Health Care**

Pharmacists who provide specific, personal medical care or advice online should:

- abide by any regulatory requirements governing the profession and the PSA Code of Ethics;
- protect patients' confidentiality;
- clearly disclose any sponsorships, financial incentives, or other information that would likely affect the patient's or client's perception of professional's role or the services offered; and
- clearly disclose what fees, if any, will be charged for the online consultation and how payment for services is to be made

The internet and social media are powerful tools for helping to meet patients' health-care needs, but users need to understand that it also has limitations. Pharmacists using these tools should clearly and accurately:

- identify themselves and tell patients or clients what their professional credentials are:
- make good faith efforts to understand the patient's or client's particular circumstances and to help them identify health-care resources that are available locally; and
- give clear instructions for follow-up care when appropriate or necessary

Pharmacists who offer personal medical services or advice online should:

- clearly and accurately describe the constraints of online diagnosis and treatment recommendations;
- help "e patients" understand online consultations have limitations and generally should not take the place of a face-to-face consultation; and
- consider including their registration number and a link to the Register of Health Practitioners to verify currency of registration and no limits on scope of practice.

Check with your identity provider about level of cover and/or restrictions on cover when using social media or internet.

# **Responsible Partnering**

Consumers need to be confident that pharmacists using the internet or social media undertake to partner only with trustworthy individuals or organisations. An example could be a partnership with a pharmaceutical company. Sites should:

- Avoid accepting (or making) friend from patients/clients unless the site is designed for patient interaction. Accepting or making friends on a site should only be done after serious consideration of the potential impact;
- make reasonable efforts to ensure that sponsors, partners, or other affiliates abide by applicable law and uphold the same ethical standards as the sites themselves;
- insist that current or prospective sponsors not influence the way advice is given; and
- indicate if links to other sites are provided for information only or are endorsements of those other sites.

# **Accountability**

Consumers need to be confident that pharmacists providing health information, products, or services on the internet or via social media take users' concerns seriously and those sites make good-faith efforts to ensure that their practices are ethically sound. Sites should:

- indicate clearly to users how they can contact the owner of the site or service and/or the party responsible for managing the site or service;
- provide easy-to-use tools for visitors to give feedback about the site and the quality of its information, products, or services; and
- review complaints from users promptly and respond in a timely and appropriate manner

Sites should encourage users to notify the site's manager(s) or customer service representatives if they believe that a site's commercial or non-commercial partners or affiliates, including sites to which links are provided, may violate law or ethical principles.

Sites should describe their policies for self-monitoring clearly for users, and should encourage creative problem solving among site staff and affiliates.

Some pharmacists may use the same social media or internet account for business and personal use and as such some principles should be applied to personal use.

#### Personal use

Many of the above issues are equally applicable to private use of the social media. There are many guides to the safe use of social media, and most highlight a number of ways to mitigate risks when using social media, including:

- Even if you aren't actively using social media, information or photos you can still appear in information or photos posted by others so it is wise to people know if you don't want information or photos of you put up on social networking sites.
- Use recommended privacy settings for social networking sites.
- Don't makes "friends" with people you do not know.
- Don't share personally identifiable information that can be used in identity theft
- Don't follow links to unfamiliar sites.
- Choose applications wisely as many share information with marketers and other sites.
- Use up-to-date anti-virus and anti-spyware.
- Use a different, robust password for each online account.
- Don't share any passwords.
- Be wary of sharing your location as it indicates when you're not at home or in the practice.
- Learn to recognise 'phishing' attacks which are usually emails asking for personal details.

 Remember what goes online can be accessed for a long time. Most employers now "Google" prospective employees so remember information you post can be seen at a later date.

# Other professional resources

The AMA in its Social medial and the medical profession A guide to online professionalism for medical practitioners and medical students available <a href="here">here</a> provides advice under some major topic headings which are applicable to all professional and personal use:

- · Be careful about what you say and how you say it
- Keep your friends close and others ... not so close
- · Consider the destiny of your data
- Take control of your privacy

### Some social media vehicles

#### **Twitter**

Twitter is an online social networking and microblogging service that enables its users to send and read text-based posts of up to 140 characters. It can be used to promote business activities, build customer awareness and brand loyalty, establish a sense of action and disseminate emergency and time-critical information.

#### **Facebook**

Facebook is a social networking service and website that can be used to build a reliable network of prospective customers and communication channels. With the emergence of Twitter, Facebook has shifted to a pull-driven culture, where the customer 'likes' what is published by the pharmacist on other channels (eg. the web site or blog).

- a. People that are frustrated with social media are usually those that only have a Facebook page; they struggle to provide content to it and struggle to leverage business relationships out of it.
- b. Facebook is strongest in the interpersonal market, between friends and family, between colleagues, fellow students and associations. Facebook works with person-to-person relationships and is not designed for person-to-organisation.
- c. Intranet based internal social networks (Facebook copies for internal use) can build teamwork and knowledge exchange when made available in-house.

#### YouTube

With is a video-sharing website with a focus on short videos and ranking of crowd-sourced material, YouTube is a very diverse and popular web site. YouTube is best used as a 'player' of video material. Users are driven to the site by viral marketing techniques, or the video may be topical or irreverent or related to a specific educational need so that it is found as a result of a YouTube search.

## LinkedIn

The LinkedIn is a business-related networking site that has emerged as a powerful tool for developing professional networks, and is typically described as a professional version of Facebook. LinkedIn has benefits to the pharmacist, such as access to industry-related information and experts in particular fields, and to maintain contact with previous colleagues at other companies. It can be a good source of recruitment referrals, but on balance employees could equally well receive job offers from external organisations.

# **Community Networking**

There is a growing list of community networking sites such as MySpace, Bebo, Blogspot and Flickr. These web sites are primarily targeted at specific age groups and special interest groups, and broadly speaking they are used for cultural, arts and creative interests.

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