



EXPLAINING TRAINING — UPDATES TO QCPP TRAINING REQUIREMENTS

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T2C Pharmacy Medicines and Pharmacist Only Medicines Checklist requires staff who supply these medicines to undergo initial training via a recognised course and ongoing refresher training.

This requirement supports the appropriate supply of these scheduled medicines to the Australian community.

While most pharmacies are aware that these 'S2/S3' training requirements exist, what the requirements are and which staff members they apply to, appears to be a common point of confusion for many pharmacies. In response to this, QCPP have clarified the requirements in updates to:

- T2C Supplying *Pharmacy Medicines* and *Pharmacist Only Medicines* Checklist
- Training Requirements for *Pharmacy Medicines* and *Pharmacist Only Medicines* brochure

The following pages describe who the requirements apply to and what evidence is needed to meet the annual refresher training requirements. More information is available at www.qcpp.com If you have queries regarding these requirements, and how they apply to your pharmacy, contact your QCPP State Manager or email interpretations@qcpp.com.

T2C SUPPLYING PHARMACY MEDICINES AND PHARMACIST ONLY MEDICINES CHECKLIST

	Action to meet the program requirement	Evidence required at assessment
Action 2.1	Ensure all staff who directly supply <i>Pharmacy Medicines</i> or assist the pharmacist with the supply of <i>Pharmacist Only Medicines</i> have received initial training via a Recognised Course and ongoing Refresher Training in supplying <i>Pharmacy Medicines</i> and <i>Pharmacist Only Medicines</i> .	Proof of compliance with the 'Training Requirements for <i>Pharmacy Medicines</i> and <i>Pharmacist Only Medicines</i> ' brochure.

THIS ARTICLE SUMMARISES

TRAINING REQUIREMENTS FOR PHARMACY MEDICINES AND PHARMACIST ONLY MEDICINES

VERSION 2.2

For more information go to: www.qcpp.com/resources/training-requirements.



WHO DO THE TRAINING REQUIREMENTS APPLY TO?

Action 2.1 applies to all pharmacy assistants who are directly involved in the supply or support the supply of *Pharmacy Medicines* and/or *Pharmacist Only Medicines*.

EXCEPTION:

Where all these products are out of reach of customers, only staff who work in the area where *Pharmacy Medicines* and/or *Pharmacist Only Medicines* are supplied require the training.

The exception applies to pharmacies who comply with **T2C** Action 6.3 (non-mandatory) where all *Pharmacy Medicines* are stored out of reach of customers.

All Queensland and Western Australian pharmacies should be compliant with this requirement as keeping *Pharmacy Medicines* out of reach is a legal requirement in these states.

The addition of the word 'directly' to Action 2.1, and the removal of the '50% rule' is intended to add clarity to which staff members are subject to the requirement. The examples illustrated below provide guidance on how the requirement and ruling apply.

SCHEDULED MEDICINES OUT OF CUSTOMER REACH			
Example Pharmacy A	 <p>Sarah DISPENSARY/ PROFESSIONAL AREA</p>	<p>Sarah is a pharmacy assistant who works in the professional services area. She supplies <i>Pharmacy Medicines</i> as a core part of her role.</p>	<p>TRAINING? YES</p>
	 <p>COUNTER</p>	<p>Brad packs shelves in the general merchandise area of the pharmacy. During busy periods he helps serve in the professional services area.</p>	<p>TRAINING? YES</p>
	 <p>POS James Brad</p>	<p>James works at the checkout in the pharmacy processing sales. He never works in the professional services area.</p>	<p>TRAINING? NO</p>

PHARMACY MEDICINES WITHIN CUSTOMER REACH			
Example Pharmacy B	 <p>Mark DISPENSARY/ PROFESSIONAL AREA</p>	<p>Mark is a first year pharmacy student who works in the dispensary on weekends.</p>	<p>TRAINING? YES</p>
	 <p>COUNTER</p>	<p>Sam is a pharmacy assistant who works on weekends in a small pharmacy. She helps with all customer enquiries and processes sales.</p>	<p>TRAINING? YES</p>
	 <p>POS Sally Sam</p>	<p>Sally works in the cosmetics department of a large pharmacy. Her main role is to sell cosmetics. Sometimes she helps process general sales at the checkout when it gets busy.</p>	<p>TRAINING? YES</p>
	 <p>Karen</p>	<p>Karen is a weight loss consultant who conducts weight loss consultations and promotes meal replacement products. She never processes sales at a checkout and she never assists in requests for non-prescription medicines.</p>	<p>TRAINING? NO</p>

ALL PHARMACIES		
	<p>Amanda is employed as a delivery driver part-time. She only delivers medicines (including <i>Pharmacy Medicines</i>) and other pharmacy goods to customers at home each morning.</p>	<p>TRAINING? NO*</p>

* Pharmacy must comply with P11F



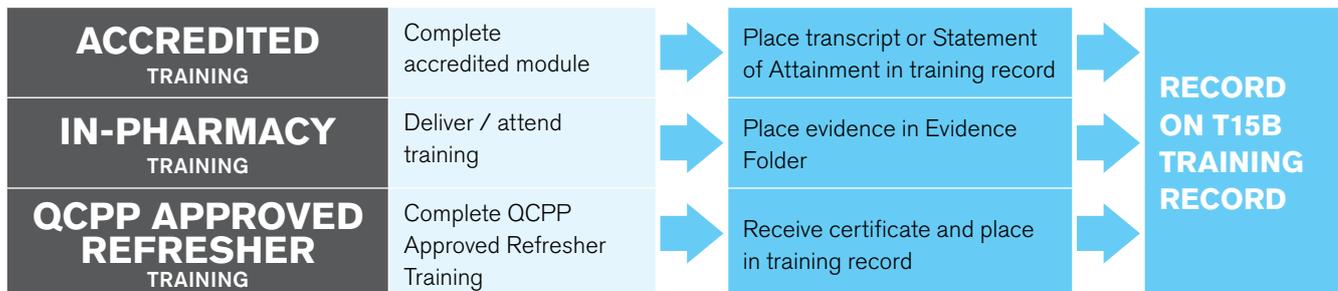
REFRESHER TRAINING

Pharmacy staff need to complete at least three hours of refresher training each year. Following a review, the evidence requirements for In-Pharmacy Training have been better aligned with the evidence required for both accredited training and QCPP Approved Refresher Training. The evidence requirements for different avenues for completion of Refresher Training are summarised in the table below:

REFRESHER TRAINING	EVIDENCE REQUIRED AT ASSESSMENT
Accredited Training	A statement of attainment or transcript of results issued by the Registered Training Organisation (RTO) and recorded on the staff training record.
In-Pharmacy Training [new requirements]	Evidence of the training activity and recorded on the staff training record. Examples of evidence could include, but are not limited to: <ul style="list-style-type: none"> ▪ Presentation materials ▪ Staff meeting record/minutes ▪ Session outline ▪ Signed attendance list
QCPP Approved Refresher Training	The certificate of completion/attendance and recorded on the staff training record.

The revised In-Pharmacy Training evidence requirement is not intended to be a burden to pharmacies who deliver in-pharmacy training as this evidence is likely already being generated by conducting the training activity. Evidence could include handouts, signed attendance lists, session outlines or staff meeting minutes. Any other reasonable evidence that the training has occurred will be accepted as evidence for this requirement. Once the training has been run, it is recommended the activity be placed in the pharmacy's Evidence Folder.

HOW DO I MAINTAIN REFRESHER TRAINING EVIDENCE?



REFRESHER TRAINING REMEDIAL ACTIONS

How are remedials treated when a staff member has not completed the minimum 3 hours per year refresher training requirement?

If a staff member has not completed the minimum 3 hours refresher training for each year, the assessor will raise a remedial action. The remedial action will be closed out when the pharmacy provides the assessor with evidence the staff member has completed 3 hours refresher training for the last year.

The evidence required is outlined in the 'Training Requirements for *Pharmacy Medicines* and *Pharmacist Only Medicines*' brochure, available at www.qcpp.com.

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