



POLICY

Failure to Comply Policy

Purpose

The purpose of this policy is to describe how QCPP will respond to non-compliance with any QCPP requirement.

Application

In those instances where a pharmacy has been identified as failing to meet the requirements of the Program, they will be given a set period to remediate the issues identified. If the requirements are not met within the nominated timeframe this will be considered a failure to comply and the pharmacy's accreditation will be withdrawn, or in the case of a pharmacy undergoing an initial assessment they will not be granted accreditation.

Instances where pharmacies may be identified as failing to meet the requirements of maintaining QCPP compliance may include, but are not limited to:

Scenario	Time frame
QCPP assessment (on-site or remote): complete all Non-Conformance (NC)	60 calendar days following interim report sent date
QCPP assessment (on-site or remote): complete all Remedial Action Required (RAR)	90 calendar days following interim report sent date
Expansion of Pharmacy Services assessment: complete all corrective actions	30 calendar days following assessment outcome release
Sanctions: correction, or corrective action(s) requested	As described in sanction
Invoice not paid by nominated due date	Due date on invoice, unless mutually agreed by QCPP and pharmacy owner/authorised delegate.
Other failure to comply with any QCPP Program Materials	As described in communication from QCPP, proportional to risk of failure to comply.

Appealable decisions

Assessment outcomes are appealable decisions, consistent with Rule 46 and the *Natural Justice Policy*.





Related rules, terms and policies

Rule 3

Rule 29

Rule 43

Rule 46

Sanctions Policy

Assessments Policy

Natural Justice Policy

Payments Policy



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