



Quality Care 2020 Pharmacy Services Guide

The QCPP Pharmacy Services Guide assists pharmacies in identifying the professional services they provide and what should be considered to meet the requirements.

This Guide has been developed for pharmacies as an example of what to expect during their assessment. Pharmacies will be required to produce evidence of policies, procedures and records already implemented for their assessor to view during the assessment.

Note: This Guide is a helpful tool but does not replace the need for a comprehensive review of the QCPP Requirements, nor does it explain what is specifically needed to meet all components of the Requirements.

For more information or to obtain greater understanding please refer to the Quality Care 2020 Requirements, visit the [Quality Care 2020 Knowledge Hub](#) or contact the [QCPP Support Team](#).

Note: The following are considerations for specific pharmacy services currently assessed under the QC2020 Pharmacy Program. Please refer to **Domain 5 Subdomain 2: Pharmacy Services – Generic Requirements** for guidance on pharmacy service not listed below and to ensure all baseline service requirements are applied in addition to the service specific components.



Professional Service	Definition/Service Qualification	Requirement Considerations
Absence from Work Certificates (5.6.1, 5.6.2)	The written verification from a pharmacist of absence from work due to illness or injury or due to caring for an immediate family member who is unwell or injured.	<ul style="list-style-type: none">• Appropriate training for all pharmacy staff• References/guidelines• Appropriate consultation area• Service procedure• Completed records that meet the requirements for the service
Complex Compounding (5.3.1, 5.3.2, 5.3.3, 5.3.4, 5.3.5, 5.3.6, 5.3.7, 5.3.8, 5.3.9, 5.3.10)	<p>The preparation and supply of a single 'unit of issue' of a therapeutic product that is intended for supply for a specific patient, and that requires or involves special competencies, equipment, processes and facilities. Products include, sterile, cytotoxic, hormone, micro-dose, single-unit dosage forms, sustained-release and modified-release preparations.</p> <p>Note: this service extends further from simple compounding and requires specialised training, pharmacy facilities and processes.</p>	<ul style="list-style-type: none">• Accredited external initial and ongoing training for all staff involved in offering the service• References/resources/guidelines• Standard operating procedures, safety data sheets, master extemporaneous formulary• Designated fit-for-purpose area for compounding• Procedures for cleaning and disinfecting• Risk management procedures for staff and patients• Systems for the following:<ol style="list-style-type: none">1. Identifying, handling, storing and disposing of raw and compounded materials2. Ensure safety and quality of compounded products3. Packaging, labelling and counselling of compounded products4. Managing product recall• Written agreement for third-party supply arrangements



Delivery Services (5.9.8)	<p>Delivery of medicines or other goods direct to the consumer or patient by employed pharmacy staff.</p> <p>Note: If an item is delivered by a third party or contractor it is considered an “Indirect supply”.</p> <p>Note: Delivery Services of medicines between the pharmacy and a residential care facility is not considered direct to a consumer/patient.</p>	<ul style="list-style-type: none">• Appropriate training for all pharmacy staff• Consumer/patient details and delivery request• Service procedure• A full delivery register
Disease State Management (DSM) (5.6.3, 5.6.4)	<p>A service that supports patients who have been diagnosed with a chronic health condition that entails monitoring and ongoing management.</p> <p>Note: This is not ad hoc testing. To qualify for this service the pharmacy must provide ongoing management of a disease state e.g. diabetes management services (blood glucose monitoring, diet and exercise, medication management cardiovascular health, general education, and referral to other health professionals).</p> <p>Note: Pharmacist prescribing does not fall under DSM.</p>	<ul style="list-style-type: none">• Appropriate training for all pharmacy staff• References/resources/guidelines• TGA/ARTG approved medical devices (if applicable)• Personal protective equipment and safe disposal of sharps (if applicable)• Adequate IT software to conduct service (if applicable)• Calibration and/or maintenance of equipment (if applicable)• Appropriate consultation area• Service procedure• Patient consent• Completed and maintained records including date of service, consumer details, service description, results of clinical tests, summary of key points discussed and planned follow up (if required)



Dose Administration Aids (DAA) (5.5.1, 5.5.2, 5.5.3, 5.5.4, 5.5.6, 5.5.7)	Dose Administration Aid services include packing of medication packs and sachets for patients.	<ul style="list-style-type: none">• Appropriate training for all staff• References/resources/guidelines• Adequate equipment which is maintained and calibrated• Dedicated, private and clean area• Access to hand hygiene and personal protective equipment procedures and facilities• System and record for DAA activities including: Current medicines, doses and items not supplied in the DAA, changes to medication, communication with prescribers, any packing errors, and classification of patient residential setting• Service procedure• List of items not to be packed• Log of DAA's packed and checked endorsed by supplying pharmacist• Evidence of receipt by the consumer/patient representative
Health Promotion (5.8.2)	<p>A process/activity where the pharmacy actively engages consumers/patients and the community to promote health and wellbeing at a group or population level (e.g. diabetes awareness, heart health, asthma management, smoking cessation).</p> <p>Note: To qualify for this service the pharmacy must create a comprehensive activity that may have screening and testing, consultation, education, promotional material, and measurable outcomes. All services should be reviewed for success and improved in the future.</p>	<ul style="list-style-type: none">• Appropriate training for all staff• References/guidelines• System and record for communication with prescribers and other health professionals/facilities• Service procedure• Completed records that meet the requirements for the service



Indirect Supply (5.9.1, 5.9.2, 5.9.3, 5.9.4, 5.9.5, 5.9.6, 5.9.7)	<p>The supply of dispensed or over-the counter medicines direct to a patient via a delivery service that is run by a contractor (eg. Australia Post).</p> <p>Note: If an item is delivered by a member of the pharmacy's staff it is considered a "Delivery Service".</p> <p>Note: Delivery Services of medicines between the pharmacy and a residential care facility is not considered direct to a consumer/patient.</p>	<ul style="list-style-type: none">• Appropriate training for all staff• A procedure that includes the different modes of ordering and delivery by third party• Lists of medicines not suitable and prohibited for delivery by a third party• An explanation of how items are packaged for supply• A copy of an agreement for services via internet with consideration of data protection• Completed records including application forms, consumer/patient details, medication record and full delivery log• Tracking and delivery confirmation process
In-pharmacy Medicine Review: MedsCheck and Diabetes MedsCheck (5.4.5, 5.4.6)	<p>MedsCheck or Diabetes MedsCheck that is conducted in the pharmacy with a focus on education and self-management.</p>	<ul style="list-style-type: none">• Appropriate training for all staff in the pharmacy• References/resources/guidelines• TGA/ARTG approved medical devices (if applicable)• Adequate IT software to conduct service (if applicable)• System and record for communication with prescribers and other health professionals• Appropriate consultation area• Service procedure• Patient consent• Completed and maintained reports that include the date of service, patient details, medication profile, outcomes, and recommendations



Medication Management Review: HMR and RMMR (5.4.1, 5.4.2, 5.4.3, 5.4.4)	<p>A medicines review conducted by an accredited pharmacist in the patient's home (HMR) and is initiated by referral from a medical practitioner or residential care facility (RMMR).</p> <p>HMR: Home Medicine Review</p> <p>RMMR: Residential Medication Management Review</p>	<ul style="list-style-type: none">• Accredited external training• References/resources/guidelines• List of tasks completed by community pharmacy and by accredited pharmacist, if conducted by a contracted HMR provider as applicable• Service procedure• Patient consent• Completed and maintained records including a copy of the final report and any associated paperwork
Medicines Adherence (5.4.7)	<p>A program that encourages patients to take prescribed medicines consistently and according to the regimen intended.</p> <p>Note: This is not a DAA but a service that identifies medication adherence issues and assists patients to improve compliance. An outcome of the service could be commencement of a DAA.</p>	<ul style="list-style-type: none">• References/resources/guidelines• Maintenance of systems that conduct medicine adherence• Service procedure including identification of potential patients• Patient consent• Completed and maintained records



Needle and Syringe Program (NSP) (5.7.1, 5.7.2, 5.7.3, 5.7.4, 5.7.5)	Provides sterile injecting equipment and education to prevent blood-borne disease for patients using injectable products.	<ul style="list-style-type: none">• Appropriate training for all pharmacy staff• References/resources/guidelines• Procedure for infection control• Availability of sharps containers for consumers• List of appropriate health professionals and organisations that consumers can be referred to• Safe disposal of sharps (container located in an area not easily accessed by unsupervised children)• Service procedure• System for managing, recording and reporting needle stick injuries
Opioid Substitution Program: Opioid Replacement Therapy (5.7.6, 5.7.7, 5.7.8, 5.7.9, 5.7.10, 5.7.11)	Opioid replacement therapy program, usually offered in conjunction with a pharmacy's state/ territory health program.	<ul style="list-style-type: none">• Appropriate training for all pharmacy staff• References/resources/guidelines• List of appropriate health professionals and organisations that can be referred to• Adequate equipment which is maintained and calibrated• Appropriate dosing materials and facilities for the patient• A sufficiently sized drug safe• Discreet and professional dosing area• Service procedure which covers both dosing within the pharmacy and take away supplies• System and record for communication with prescribers and other health professionals/facilities• Completed records including patient photograph, signed agreement, prescriber details, prescriber communication and supply record



<p>Screening and Risk Assessment (SRA) (5.6.5, 5.6.6, 5.6.7)</p>	<p>The undergoing of tests or questions to identify consumers/patients who may be of risk or have a health condition which requires further investigation.</p> <p>Note: This is not only ad hoc testing. To qualify for this service the pharmacy must have a wholistic approach with records of testing results and patient outcomes.</p> <p>Note: Pharmacist prescribing does not fall under SRA.</p>	<ul style="list-style-type: none"> • Appropriate training for all pharmacy staff • References/resources/guidelines • TGA/ARTG approved medical devices (if applicable) • Personal protective equipment and safe disposal of sharps (if applicable) • Procedure for infection control • Adequate IT software to conduct service (if applicable) • Calibration and/or maintenance of equipment (if applicable) • Appropriate consultation area • System and record for communication with prescribers and other health professionals/facilities • Service procedure • Consumer/patient consent • Completed and maintained that meet requirements for the service
<p>Services to Residential Care Facilities (5.8.3, 5.8.4, 5.8.5)</p>	<p>Services provided to residential care facility staff and residents aimed at ensuring quality use of medicines (QUM).</p>	<ul style="list-style-type: none"> • Appropriate training for all pharmacy staff • References/resources/guidelines • Procedures for services conducted • Records of each resident • System for recording and reporting medication related incidents • A contract between the pharmacy and residential care facility



Staged Supply (5.7.12, 5.7.13)	A clinically-indicated, structured pharmacist service involving the supply of medicine to a patient in periodic instalments as requested by the prescriber or carer.	<ul style="list-style-type: none">• Appropriate training for all pharmacy staff• References/resources/guidelines• Appropriate dosing materials and facilities• Discreet and professional dosing area• Service procedure which covers both in-pharmacy and take away dosing• System and record for communication with prescribers and other health professionals/facilities• Completed records including patient details, prescriber details, prescriber communication and supply record
Vaccination Services in the Pharmacy (5.8.6, 5.8.7, 5.8.8, 5.8.9, 5.8.10, 5.8.11, 5.8.12)	Pharmacists providing immunisation services within the pharmacy.	<ul style="list-style-type: none">• Accredited external training (First Aid, CPR, Vaccination & anaphylaxis)• References/resources/guidelines• Emergency protocols and training for all pharmacy staff• Personal protective equipment and safe disposal of sharps• Infection control procedures• Access to hand hygiene procedure and facilities• Appropriate consultation and observation areas• System and record for communication with prescribers and other health professionals• Service procedure• Completed and maintained records including consumer, pharmacy, pharmacist, and vaccine details and date of service and next vaccine• Consumer information and adverse effects advice• Notification processes (e.g. immunisation register, local health department)



**My Health Record (MHR)
(5.10.1, 5.10.2, 5.10.3, 5.10.4)**

Pharmacies accessing and/or uploading to a patient's My Health Record (MHR).

- Appropriate training for all pharmacy staff
- Completed and maintained security and access policy
- Valid NASH PKI certificate
- Process of action in the event of a clinical incident or access/data breach