COVID-19 PANDEMIC

Guidelines for Community Pharmacy

24 March 2020

Information and guidance for community pharmacies in Australia


Disclaimer

The preparation of this guide by the Pharmacy Guild of Australia is intended to be a supporting resource to provide pharmacists with information to assist them in safely operating their pharmacy and meeting community needs during the COVID-19 pandemic.

The Guild recognises that each pharmacy is unique and will need to innovate and adapt guidance relevant to their pharmacy and circumstances and following a risk assessment for their pharmacy, as well as in accordance with any direction provided by Commonwealth, State or Territory authorities.

These Guidelines do not replace the need for pharmacists to exercise professional discretion and judgement and to comply with relevant laws and professional standards and codes. The Guidelines do not include detailed legislative requirements with regards pharmacy practice.

The COVID-19 pandemic situation is evolving rapidly with information and advice being provided or updated constantly. As such, to maintain currency these documents will be periodically reviewed and updated. It is important the reader ensure they are reading and using the most up to date version.

The Pharmacy Guild of Australia welcomes suggestions or improvements to our resources, especially if a reader identifies any inaccuracies or ambiguities.

We also encourage members to research or utilise resources available through various government agencies in the development of business continuity plans and risk management practices.
INTRODUCTION

Community pharmacies are an essential primary healthcare service and are often the first point of contact for information and advice related to COVID-19, as well as the continued supply of medicines for those with chronic conditions.

Responsibilities and role of community pharmacy

During this pandemic, community pharmacies have the responsibility of:
- Storage and supply of appropriate stocks of medicines, devices, masks etc.
- Informing and educating the public
- Counselling
- Triaging and referring patients
- Promoting disease prevention
- Promoting infection control

Ensuring the continuity of these services is critical.

Business continuity and pandemic planning

Every pharmacy owner should have a business continuity plan outlining how their pharmacy will continue to operate during an unplanned service disruption.

To complement any business continuity plan, the Guild has also developed a Pandemic Planning template to assist pharmacists in preparing for unplanned contingencies associated with a pandemic such as COVID-19. This can be accessed from www.guild.org.au and used by pharmacists to develop their own specific pandemic plan which reflects the individual requirements of their pharmacy and community.

This Guide provides practical information, guidance and procedures for community pharmacies in Australia to ensure their staff stay safe, well, and can continue to provide essential services for the duration of the pandemic and should be used in conjunction with the pharmacy’s business continuity plan and COVID-19 pandemic plan.

Where to go for information

Your Guild Branch is the best source of specific guidance and information relevant to pharmacy practice, operations, or jurisdictional directives. Please contact them for any queries.

PHARMACY ACTIVITIES

Pharmacy operations and facilities: ensuring safety and continuity of service

Community pharmacies are considered essential health services during the COVID-19 pandemic. Action should be taken to preserve the health of pharmacists and pharmacy staff to ensure the continuity of essential medicine supply and health services to the community.

Extreme measures may need to be considered as soon as possible, and as advised by Commonwealth and/or State and Territory governments.

Professional oversight and leadership

It is important to designate a lead pharmacist to provide professional oversight and leadership and to coordinate the pharmacy’s response. Additionally, a managing pharmacist should be identified to provide supervision of all activities and all staff for each shift.

Managing changes to operating hours or the need to close the pharmacy

Pharmacies are considered essential services during the COVID-19 pandemic, so closure of the pharmacy or a change to operating hours due to staff shortages or infection, may or will have a number of implications that pharmacy owners will need to consider carefully before making any decision.

These may include, and are not limited to, considerations or requirements such as:
- PBS considerations
- Leasing and tenancy considerations
- Contractual obligations
- Employment arrangements and Workplace Relations obligations
- Professional obligations
- Financial obligations

Speak to your Guild Branch for specific guidance.

Any changes to the operation of the pharmacy should be clearly communicated to the community and relevant stakeholders. Wherever possible, communicate when the pharmacy will reopen, if known.

Continuity of care for patients of the pharmacy should be planned and clearly communicated.

These patients could include those:
- Receiving Dose Administration Aids (including Community or Aged Care Facility patients)
- Receiving Opioid Replacement Therapy
- On Staged Supply Arrangements
- With Prescriptions kept on file
- Where existing supply or delivery arrangements are in place

Consider collaborating with surrounding pharmacies to roster opening hours.
**Managing patients in the pharmacy**

In order to assure the health of pharmacy staff and therefore continuity of supply of medicines and services to communities, especially where there is only one pharmacy within a town, contact with patients/consumers may need to be managed to minimise contact, however possible.

**Options to consider**

Pharmacies may consider any of the below approaches and activities or a combination of these, as is practical and realistic in their pharmacy. There may be specific advice or direction from Commonwealth or State/Territory authorities, which may change as the situation evolves.

1. **Reducing patient numbers in pharmacy at any one time**
   - Create ‘one-way’ traffic flow around the pharmacy
   - Place marks on the ground to indicate 1.5 metre distance between patients and staff
   - Construct a plastic or perspex shield in front of the dispensing area, counters and POS areas.
   - Reduce patient numbers by asking people to wait their turn outside the pharmacy (and keep a distance of 1.5 metres whilst waiting in the queue)

2. **Limit access to parts of pharmacy**
   - Cordon off areas of pharmacy to restrict patient movement and to avoid general browsing
   - Pharmacy staff to man a ‘reception’ desk and coordinate product selection and prescription requests for patients in queue
   - Do not allow patients to self-select products
   - Remove public access to testers
   - Do not allow patients to wait in pharmacy – take contact details and phone when items are ready for collection
   - For services such as vaccination, allow one patient at a time to the consultation room/area and observation area. Do not provide services with direct patient contact to a patient with respiratory symptoms

3. **Limit entry to pharmacy**
   - Do not allow entry to any patient by having a barrier (such as a desk or counter) just inside the pharmacy doors, or through a small window, façade or door (e.g. like those used for night services at petrol stations etc.)
   - Pharmacy staff to coordinate product selection and prescription requests in turn
   - Take contact details and phone when items are ready for collection
   - For services such as vaccination, allow one patient at a time to the consultation room/ area and observation area. Do not provide services with direct patient contact to a patient with respiratory symptoms

**Supply of medicines**

The Australian Government has advised that Australia is well set up to ensure continuity of medicines supply and that there is no reason for people to unnecessarily stockpile medicines. Pharmacies have a critical role is ensuring access to medicines during the Pandemic while managing unreasonable requests that could potential precipitate a national shortage.

Prescription medicines
Pharmacists are requested to limit request for prescription medicines to one supply only at any one time. For most PBS medicines, this generally means a patient will have one month’s supply. As with any medicine shortage, if local supplies are disrupted, pharmacists should use their professional judgement and there may be times when pharmacists can only supply part of the pack with a balance owing when orders are fulfilled. Likewise, for prescriptions for larger quantities, pharmacists should use their professional discretion based on stock availability.

OTC medicines
Similarly, pharmacists have been requested to limit the sale of OTC medicines to only one pack at a time. Pharmacists still need to ensure supply is safe and appropriate and based on therapeutic need, consistent with legislation and professional standards.

As restocking delays have particularly affected supplies of salbutamol inhalers and children’s analgesics, additional measures have been put in place for these medicines:
- children’s analgesics should be stored behind the counter away from public access
- salbutamol inhalers should be labelled and supply recorded in the pharmacy’s dispense system

Medicine shortages
Since January 2019, there is legislative requirements for medicine sponsors to notify the TGA of a medicine shortage, including a potential shortage. Details of prescription shortages are promptly recorded on the TGA website. https://apps.tga.gov.au/prod/MSI/search

If pharmacies are experiencing a supply issue relating to a particular prescription medicine and it is not listed on the TGA website, it is most likely a local supply disruption. If the disruption is prolonged and there is no information published, pharmacists should notify the TGA via medicineshortages@health.gov.au.

Supplier deliveries
If possible, deliveries to the pharmacy should occur without any external parties entering the pharmacy (or at least the non-public areas of the pharmacy).

Delivery containers/tubs should be cleaned and disinfected before being taken inside the pharmacy if possible.

Medicines home delivery
Pharmacies may consider home delivery of essential medicines and other products to support the community, especially those in home quarantine or self-isolating due to being in a vulnerable group or with reduced mobility.

Under the National Health Act 1953 (Cth), approved pharmacists are able to charge a discretionary fee for the delivery of a PBS medicine. Providing a delivery service should be at the discretion of the pharmacy owner or manager and will be influenced by the staffing capabilities and potential staff absence from the pharmacy. Delivery services should also ensure the safety of the delivery personnel.

Any delivery service should follow professional guidelines and existing pharmacy procedures (e.g. QCPP requirements) and ensure that there is not two-way transmission of the virus between delivery personnel and patients.
The Guild is developing a specific COVID-19 Home Delivery Service protocol which considers all factors such as resources, costs, infection control procedures, and logistics. This will be added to the Guild website as soon as it is finalised.

**Vaccination services**

Influenza vaccination is an important measure to prevent influenza and its complications and is especially important during the COVID-19 pandemic, particularly for front line healthcare workers and at risk people.

Encouraging all pharmacy staff to have an influenza vaccine is important to best protect them from influenza.

Pharmacies should consider their own risk management, operational and business continuity plans when deciding whether they will provide vaccination services during the COVID-19 pandemic.

Pharmacy owners are obliged to ensure they provide a safe working environment for their staff. Additional precautions should be considered to protect staff and patients when providing vaccination services at this time. There has been no specific advice regarding PPE issued from relevant authorities to date.

In addition to existing professional guidelines or pharmacy procedures, pharmacists administering vaccines may consider the following:

- Wearing appropriate PPE (which may include mask, gloves)
- Minimising time spent in enclosed consultation room/area by conducting pre-screening assessments at another area in the pharmacy where a 1.5m distance can be maintained
- Scheduling appointments with sufficient time in between to allow for cleaning and disinfecting of any surfaces (e.g. benches, chair, door handle)
- Allocate a waiting area/s for the 15 minute observation period that allows for social distancing of at least 1.5m, and no more than 1 person per 4m²
- Any other additional precautions advised by local authorities

**In the pharmacy**

**Product selection**

Consider not allowing patients to self-select products to avoid multiple people touching these products. Pharmacies may wish to discourage this, and general browsing by cordoning off areas of the pharmacy and restricting access to pharmacy personnel only. Consider removing product testers from shelves.

**Signage**

External and internal signage at the pharmacy is vital to communicate health messages or changes to service procedures. The Guild has developed a number of posters for use by pharmacies, and these may be national or state/territory specific. [https://www.guild.org.au/resources/business-operations/COVID-19-Information/covid-19-resources](https://www.guild.org.au/resources/business-operations/COVID-19-Information/covid-19-resources)

Signs and posters may include:

- Do not enter if displaying symptoms
- Infection control/hygiene tips
- Social distancing within the pharmacy
- Staff abuse will not be tolerated
- Encourage patients to order prescriptions ahead by phone, or ordering app
At the counter

Consider the following suggestions to minimise virus transmission:

- Whenever possible, allocate one staff member per ‘station’ or counter and avoid swaps
- Keep only essential items – declutter counter tops
- Wipe and disinfect the counter after each patient
- Disinfect hands with sanitiser after attending to each patient

Signing of prescriptions

Many pharmacists are concerned with the increased transmission risk associated with sharing pens to sign for receipt of prescriptions. This is a legitimate concern given the duty of care to keep patients and staff safe.

Under the National Health Act, patients or agents must sign for receipt of their medicines to substantiate a claim for payment. If it is not practical to obtain a signature, a pharmacist may annotate the prescription. If a pharmacy is audited, they may need to provide a signed or annotated prescription.

The Guild has requested from the Government an exemption to this requirement while COVID remains a risk and is awaiting a response.

In the meantime, if pharmacists decide to stop obtaining signatures as a risk management strategy, they should consider how they are prepared for any audits. As an example, some pharmacists are ordering stamps against which a pharmacist can quickly countersign.

Social distancing

Consider the following suggestions to promote social distancing:

- Limit the number of people entering the pharmacy at any one time
- Establish a safe distance of at least 1.5 metres (or 2 arm lengths) when attending a patient
- If necessary, use a tray to collect prescriptions, hand over medicines, and process payments. Consider placing dispensed medicines and prescriptions in a sealed clear plastic bag to avoid multiple people touching them.
- Advise patients to keep a safe distance of at least 1.5 metres (or 2 arm lengths) between them while waiting, and using marking tape on floor to indicate where they may stand

Advise patients to:

- Minimise the time spent in the pharmacy by phoning ahead to request prescriptions or use script ordering apps. Wait in the car until their items are ready.
- Vulnerable patients should avoid visiting the pharmacy. Whenever possible, patients should ask family members, friends or neighbours to go to the pharmacy instead of them.
- Make use of home delivery options if possible.

Guidance for pharmacy services and activities

- Consider restricting or suspending pharmacy services, especially those requiring direct patient contact if they could represent a risk to the health of the pharmacy staff, for example, in patients with respiratory symptoms
- Patients with respiratory symptoms should be referred to their local state/territory COVID hotline for triaging and advice
• Recognising that there are other infectious respiratory conditions in addition to COVID that people may have requiring pharmacists to supply prescription and/or OTC medicines, pharmacists should take similar precautions to minimise transmission by social distancing and use of appropriate PPE

• Consider any additional protective measures when:
  o providing essential services requiring direct patient contact, such as the administration of vaccines
  o Dispensing and handling prescriptions, cash and other paperwork

Guidance for the pharmacy team

• To ensure the continuity of pharmacy activities, if possible, pharmacists should consider dividing pharmacy staff into shifts with arrangements between shifts to disinfect the pharmacy. Also consider minimising transmission between staff members by implementing arrangements so that members of each shift do not cross each other. For example, shifts could be divided into morning and afternoon, or a day at the time. You should ensure an appropriate skill mix for each shift

• Staff that have symptoms of a respiratory infection or who have been in contact with someone diagnosed with COVID-19 should advise pharmacy management before coming in and make the necessary arrangements for testing

• Staff that are immunocompromised should consider their circumstances and advice about attending work. If working, they should use masks and preferably perform non-patient facing tasks. Hand hygiene measures should be reinforced

• Staff should change uniforms more often. Consider laundering options such as installing washing machines and dryers for staff if you have a room and functionality to do so

• Staff should avoid wearing accessories such as bracelets, watches and rings if possible

• Whenever using a mask or other PPE, hygiene and disinfection of hands should be performed before and after

What if a staff member is infected with COVID-19?

Staff who are infected with COVID-19 should follow advice provided by the local health authorities and their medical team.

It is likely that their employer will be notified by health authorities and provided with specific instructions and advice.

The Guild is currently waiting on general advice to provide to members regarding issues such as the need to potentially close the pharmacy, and any infection on decontamination requirements. This information will be made available as soon as it is confirmed.

Preventive measures

Pharmacists and pharmacy assistants can play a significant role in preventing the spread of COVID-19.

They can do this by:

• Understanding the nature of the disease, how it is transmitted, and how further spread can be prevented

• Knowing how to access trusted and reliable information sources such as those from Commonwealth and State or Territory Health Departments, and to ensure the maintain currency of that information

• Informing, advising and educating the community

• Supplying appropriate products
• Encouraging individuals and families with suspected cases of COVID-19 to self-isolate and referring at higher risk to their GP, Respiratory Clinic or ED as appropriate for testing and follow-up. See guidance below

**Use of masks and other personal protective equipment**

Wearing a surgical mask is one of the prevention measures to limit spread of COVID-19 in affected areas. However, the use of a mask alone may be insufficient to provide an adequate level of protection and other relevant measures should be considered based on relevant advice from the authorities.

If worn properly, a mask helps block respiratory secretions produced by the wearer from contaminating other people and surfaces.

Currently, the Chief Medical Officer, advises that ‘masks are not currently recommended for use by healthy members of the public for the prevention of infections like coronavirus.’

The Department of Health recommends the use of additional PPE (e.g. gowns, protective eyewear or gloves) only when treating a confirmed or epidemiologically suspected COVID-10 case.

See Guild website for links to resources on how to fit a mask correctly.

**Interventions and patient counselling**

Pharmacists have a pivotal role to play in public health and informing the community about preventive measures, advising about behavioural changes and in the risk assessment, early detection and referral of individuals at higher risk of being infected.

Information should be current, based on sound scientific evidence or official advice and not driven by panic.

In all cases, it is critical that pharmacists and pharmacy staff protect themselves from infection by keeping a safe distance from patients and members of the public and frequently disinfecting any surfaces that may be touched by them.

Since COVID-19 infection can occur from asymptomatic or pre-symptomatic individuals, precaution is recommended with ALL patients entering the pharmacy.

See Guild website for resources or links for managing suspected or confirmed cases of COVID-19.

*Note: While travel history from affected areas is still an important criterion, it will no longer be a relevant criterion for triage when community-based transmission becomes the main form of disease transmission.*

**Cleaning and disinfection management**

COVID-19 is transmitted through droplets and contact, therefore it is imperative that any areas of the pharmacy that may have been contaminated with the virus are disinfected.

Pharmacy staff should implement procedures for cleaning and disinfecting the working environment, and associated items and equipment.
**Cleaning** refers to the removal of germs, dirt, and impurities from surfaces. It does not kill germs, but by removing them, it lowers their numbers and the risk of spreading infection.

**Disinfecting** refers to using chemicals to kill germs on surfaces. This process does not necessarily clean dirty surfaces or remove germs, but by killing germs on a surface after cleaning, it can further lower the risk of spreading infection.

Further resources on cleaning and disinfection procedures will be provided shortly.