Ahpra

Practitioner and community perceptions of the Australian Health Practitioner Regulation Agency (Ahpra) and the National Boards: 2019

A Social Research Project

November 2019

Supplementary report prepared for: *The Pharmacy Board of Australia*





Introduction

- Truly Deeply was first engaged in 2018 by the Australian Health Practitioner Regulation Agency (Ahpra) to assess the perception and sentiment towards Ahpra and the National Boards.
- The review was intended to help National Boards and Ahpra better understand what stakeholders think and feel about the organisation and to identify how to facilitate ongoing confidence and trust in the work performed by Ahpra and the National Boards.
- The benchmark 2018 study used a combination of qualitative and quantitative approaches, specifically extended interviews (face to face and via the telephone), focus groups and online surveys.
- Given the value of the insights delivered through the 2018 benchmark study to Ahpra and National Boards, the decision was taken to update the quantitative measures by conducting the online survey with practitioners and the general public in November 2019.
- A single, integrated report has been provided to Ahpra documenting the key themes and results.
- A separate summary has been provided for each of the National Boards based on the results of the online survey with practitioners.
- The purpose of this report is to present a subset of findings specifically for the Pharmacy Board of Australia.

An overview of the methodology

A two stage approach using online surveys has been used.

Stage 1 consisted of an online survey with practitioners from all 15 registered professions. This survey was conducted between October 30-November 8, 2019.

Stage 2 consisted of an online survey with a representative sample of the Australian general public. This survey was conducted between November 1– 6, 2019.

Quantitative approach

- Online surveys were conducted with practitioners as well as the broader community following the qualitative investigation.
- The 2019 questionnaires were very similar to the 2018 questionnaires, with only a small number of additions.
- Respondents to the Community Survey were sourced using an external panel provider. Quotas were placed on the sample for gender, age and location to ensure a nationally representative sample was achieved.
- Participants in the Practitioner Survey were sourced by Ahpra (using software that allowed the survey to be deployed to a random sample of practitioners in each profession).
- The practitioner sample has been weighted to ensure an equal 'voice' within the total sample of registered health practitioners (with the sample of 'nurses' and 'midwives' further separated). This has been to done to ensure that the views of professions with larger numbers of practitioners do not outweigh the views of professions with much smaller numbers of practitioners.
- For comparison between the sub-analysis groups, chi square or independent tests were conducted as appropriate, with significant differences at the 95% confidence interval indicated where applicable.

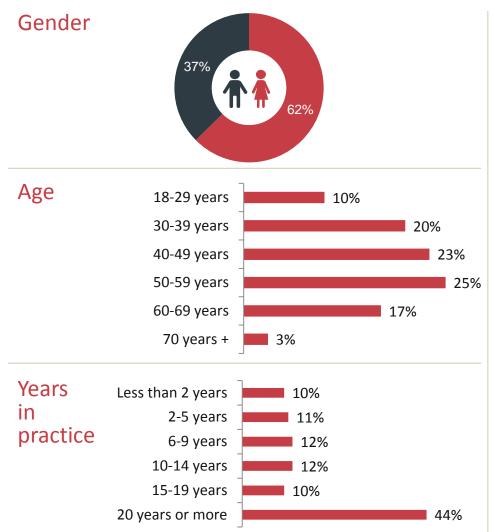
	Community Survey	Practitioner Survey
Fieldwork dates	Nov 1-6	Oct 30 to Nov 8
Responses	2,048	5,944
Email invitations sent	na	109,625
Response rate	na	5.4%



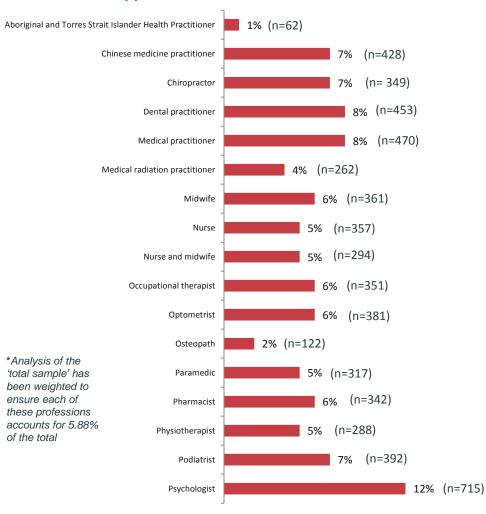
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2019 sample of registered practitioners (n = 5,944)



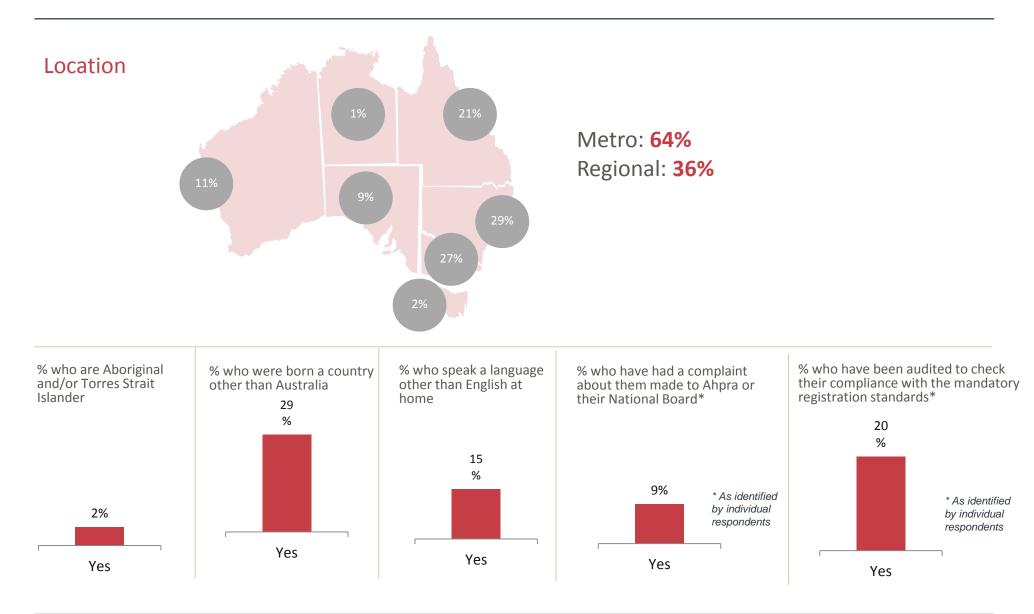
Practitioner type*



 * Figures may not add to 100%. Missing figures accounted for by 'prefer not to say'

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2019 sample of registered practitioners (n = 5,944)



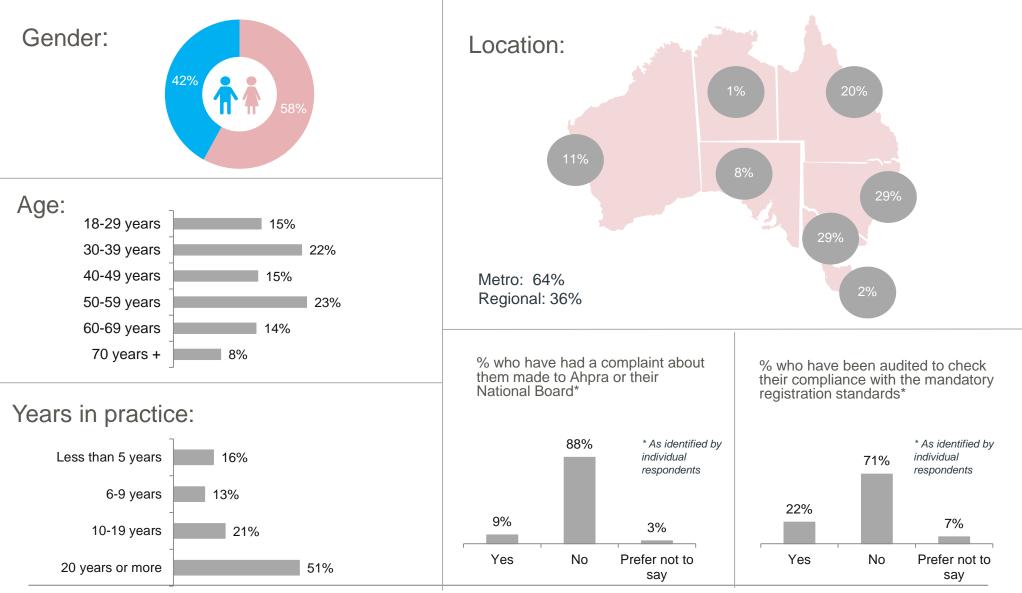
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Summary of results of the online survey with registered health practitioners.

Specific insights into the responses from: **Pharmacists**



Sample of pharmacists (n=342)



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2019: Perceptions of the pharmacist profession among practitioners*

(Top 20 Associations)

Q. Which of the following words do you strongly associate with **your profession?** Base: Total sample of practitioners registered with this specific Board (n=342)

Perceptions in 2019	% of practitioners with that perception	Difference compared to the average across all professions	Perceptions in 2019	% of practitioners with that perception	Difference compared to the average across all professions
Trusted	44%	(+22%)	Compassionate	14%	(-10%)
Professional	41%	(-6%)	Competent	13%	(-9%)
Knowledgeable	40%	(+10%)	Dedicated	13%	(-8%)
Hard working	39%	(+9%)	Reputable	12%	(+2%)
Approachable	39%	(+28%)	Empathetic	11%	(-11%)
Community minded	35%	(+22%)	Committed	10%	(-6%)
Respected	24%	(+5%)	Friendly	9%	(+4%)
Caring	22%	(-6%)	Efficient	9%	(+3%)
Responsible	20%	(-)	Team oriented	4%	(-4%)
Honest	15%	(+6%)	Kind	3%	(-1%)

Green indicates a result *significantly higher in 2019* than the average across all professions. **Orange** indicates a result *significantly lower in 2019* than the average across all professions.

* New question for 2019

2019: Perceptions of the Pharmacy Board of Australia (Top 20 associations)

Q. Which of the following words or statements, if any, do you strongly associate with the (National Board)? Base: Total sample of practitioners registered with this specific Board (n=342)

Perception	% of practitioners with that perception of the Board	Difference compared to the average across all professions	Perception	% of practitioners with that perception of the Board	Difference compared to the average across all professions
Regulators	50%	(+10%)	Rigid	13%	(+4%)
Administrators	39%	(+5%)	Controlling	12%	(+3%)
Necessary	37%	(+5%)	Intimidating	11%	(+3%)
Bureaucratic	30%	(+2%)	Shows leadership	11%	(-1%)
For practitioners	29%	(-3%)	Trustworthy	11%	(-)
For the public	28%	(+5%)	Advocates	9%	(-8%)
Decision makers	25%	(+1%)	Supportive	9%	(-4%)
Competent	16%	(+1%)	Poor communicators	9%	(-1%)
Fair	15%	(+4%)	Responsive	9%	(-)
Out of touch	13%	(+1%)	Accessible	8%	(-1%)

Green indicates a result *significantly higher* than the average across all professions. **Orange** indicates a result *significantly lower* than the average across all professions.

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Summary of changes 2018-19: Perceptions of the Pharmacy Board of Australia

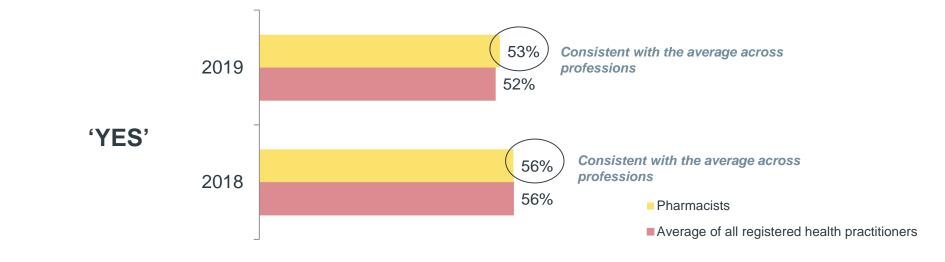
Q. Which of the following words or statements, if any, do you strongly associate with the **(National Board)?** Base: Total sample of practitioners registered with this specific Board

% of practitioners with that perception of the Board	2018 N=355	2019 N=342	% of practitioners with that perception of the Board	2018 N=355	20 N=
Regulators	45%	50%	Rigid	15%	1;
Administrators	35%	39%	Controlling	16%	12
Necessary	37%	37%	Intimidating	12%	11
Bureaucratic	29%	30%	Shows leadership	10%	11
For practitioners	31%	29%	Trustworthy	17%	11
For the public	24%	28%	Advocates	11%	90
Decision makers	25%	25%	Supportive	10%	9%
Competent	14%	16%	Poor communicators	10%	9%
Fair	12%	15%	Responsive	7%	9%
Out of touch	15%	13%	Accessible	9%	8%

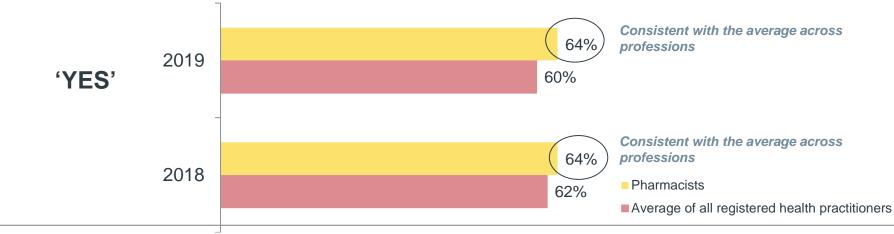
Green indicates a result *significantly higher in 2019* compared with the 2018 result. **Orange** indicates a result *significantly lower in 2019*. compared with the 2018 result

Levels of confidence and trust in the Pharmacy Board of Australia

Q. Do you feel confident that your National Board is doing everything it can to keep the public safe?



Q. Do you trust your National Board?



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What are the indicators of trust and barriers to trust in the Pharmacy Board of Australia

Indicators of trust: 64% trust the Board

I have had no reason to question the trustworthiness of the Board.

They ensure that the public have reputable pharmacists working in Australia. They don't seem to have a bias.

Dealings with them over many years has proven to me that they are listeners to both sides of arguments and always willing to help members of the profession. However, I fail to see the need for both bodies and to me it portrays yet another example of revenue raising.

I have had several dealings with them, know many of the members of the board, and I hold them in high regard.

Long history of industry advocacy and standard setting. Run by professional peers who understand the role and its challenges.

They have a good balance to discipline idiot dumb pharmacists to protect the public and the profession and do not make life hell for those professionals that are doing the right thing to the best of their abilities.

Barriers to trust: 10% DO NOT trust the Board

I see them as a punitive reactionary body that places silly expectations on pharmacist with no public benefit. I find there punishments out of touch with those given to doctors or nurses for similar issues. I believe they are necessary and important. However, I feel it could be done a lot better.

They have allowed the discount pharmacy model to take over, most pharmacists are now working under extreme pressure for peanuts, whilst they have stood by watching. They are clearly afraid of taking on the big boys who have killed the profession.

My dealings with the Pharmacy Board and the VPA have shown them to be merely a "Red Tape" organization that is self interested and not sufficiently interested in the public or the profession they regulate.

I don't think they have the best interests of the future of the pharmacy profession at the forefront of their work.

An Australia wide Pharmacy Board is too cumbersome. It is not relevant or helpful to my practice here and now in the city where I reside. To be honest, state-based Pharmacy Boards were much better.

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Full list of responses provided separately

2019: Perceptions of Ahpra among pharmacists (Top 20 associations)

Q. Which of the following words or statements, if any, do you strongly associate with Ahpra? Base: Total sample of practitioners registered with this specific Board (n=342)

Perception	% of practitioners with that perception of Ahpra	Difference compared to the average across all professions	Perception	% of practitioners with that perception of Ahpra	Difference compared to the average across all professions
Regulators	54%	(-)	Controlling	14%	(-)
Administrators	49%	(+3%)	Intimidating	13%	(-2%)
Necessary	37%	(-)	Competent	11%	(-1%)
Bureaucratic	34%	(-5%)	Secretive	10%	(+2%)
For the public	30%	(-5%)	Aloof	9%	(+1%)
For practitioners	26%	(-1%)	Trustworthy	8%	(-1%)
Poor communicators	19%	(+4%)	Accessible	8%	(-3%)
Out of touch	17%	(+3%)	Fair	8%	(-2%)
Decision makers	16%	(-5%)	Supportive	6%	(-2%)
Rigid	16%	(-)	Shows leadership	5%	(-2%)

Green indicates a result *significantly higher* than the average across all professions. **Orange** indicates a result *significantly lower* than the average across all professions.

Summary of changes 2018-19: Perceptions of Ahpra among pharmacists

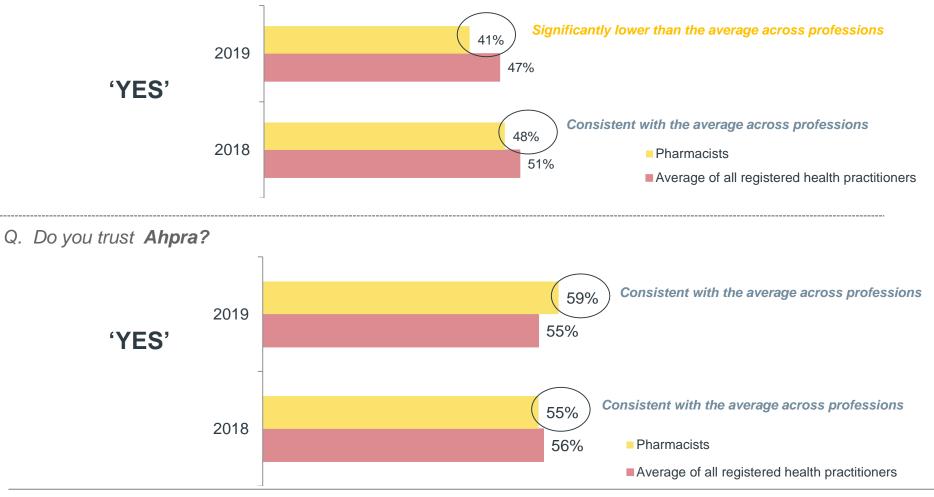
Q. Which of the following words or statements, if any, do you strongly associate with Ahpra? Base: Total sample of practitioners registered with this specific Board

% of practitioners with that perception of the Ahpra	2018 N=355	2019 N=342	% of practitioners with that perception of the Ahpra	2018 N=355	2019 N=342
Regulators	52%	54%	Controlling	15%	14%
Administrators	54%	49%	Intimidating	13%	13%
Necessary	41%	37%	Competent	10%	11%
Bureaucratic	39%	34%	Secretive	13%	10%
For the public	33%	30%	Aloof	10%	9%
For practitioners	31%	26%	Trustworthy	8%	8%
Poor communicators	17%	19%	Accessible	8%	8%
Out of touch	13%	17%	Fair	8%	8%
Decision makers	18%	16%	Supportive	4%	6%
Rigid	18%	16%	Shows leadership	4%	5%

Green indicates a result *significantly higher in 2019* compared with the 2018 result. **Orange** indicates a result *significantly lower in 2019*. compared with the 2018 result

Levels of confidence and trust in Ahpra among pharmacists

Q. Do you feel confident that **Ahpra** is doing everything it can to keep the public safe?



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What are the indicators of trust and barriers to trust in Ahpra among pharmacists

Indicators of trust: 59% trust Ahpra

No reason not to. It is better to have a national board with some clout than locals looking after themselves.

They have a responsibility to the government and the community that all health professionals operate in a responsible and ethical way.

Numerous times, Ahpra has done all it can to solve any issues. They work to ensure public safety, as well as being responsive and prompt in helping practitioners with any issues they may have.

I know people who have been involved with Ahpra and they were trustworthy people.

I trust Ahpra to investigate practitioners who are reported to have misbehaved and to maintain a standard throughout Australia. I do not like that some health professions are not under the governance of Ahpra.

They are impartial even though they are under-resourced and slow.

I trust the Pharmacy Board which in turn relies on Ahpra.

Full list of responses provided separately

Barriers to trust: 15% DO NOT trust Ahpra

They are important but again I just see paper pushing with slow action and different rules and support based on your profession.

Safety is not a priority to them, when being a witness for a case. Very intimidating when speaking to staff for interview. They provide no information of what is going on or any updates. Have seen doctors who have gotten into trouble, been allowed to do the same thing again.

It is bureaucratic and expensive. It is slow in dealing with registrations and complaints.

Hard to trust someone when you don't know them and they can appear to be working against the "good" of the profession.

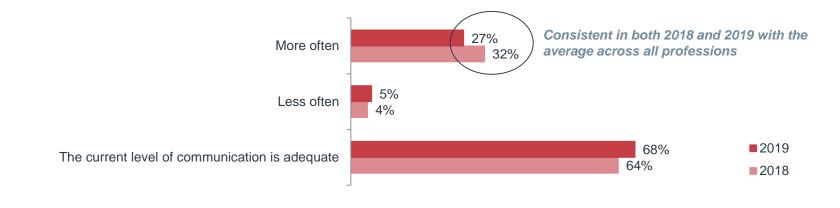
Ahpra representatives seem poorly trained in appropriately dealing with individuals concerns and as a result give poor advice that can be detrimental to a practitioner's registration. There is very little opportunity to escalate matters or speak to an adequately trained person (such as a registration officer).

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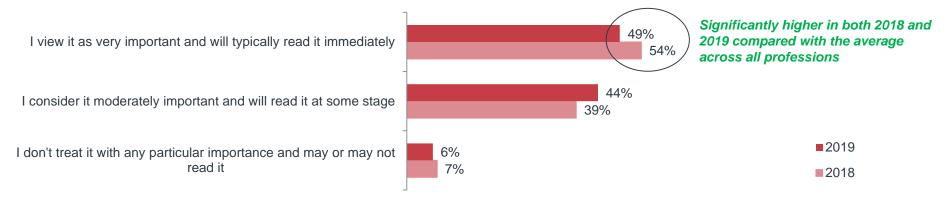
For the public not the practitioners.

Response to communication by the Pharmacy Board of Australia

Q. Would you like (National Board) to communicate with you....?



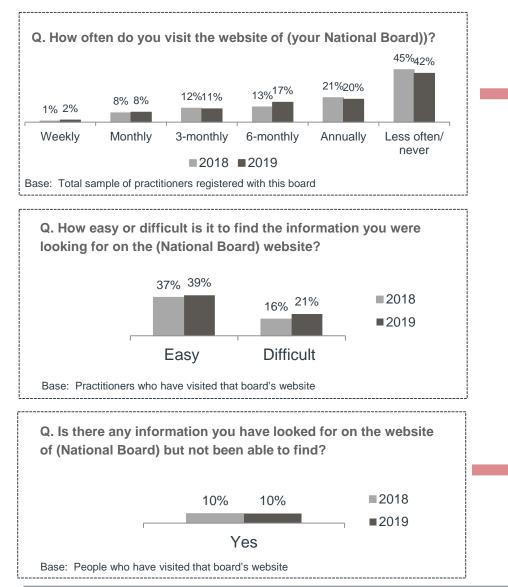
q. How do you typically respond to communication you receive from (National Board)?



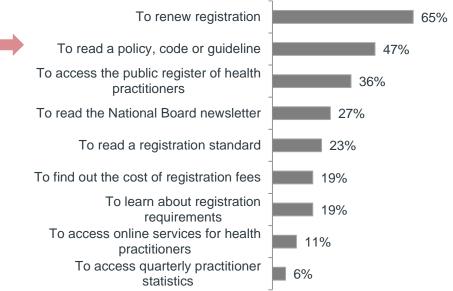
Base: Total sample of practitioners registered with this specific Board

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Use of the Pharmacy Board of Australia website



2019: Reasons for visiting the National Board website



Additional information sought by practitioners included (but was not limited to)...

- Certain regulations like what Chemist Warehouse can and shouldn't do.
- Criteria for registering after a period of non-registration.
- Statuary workload for employed pharmacists.
- Struggle to find relevant codes & policies the layout can be confusing, especially after changes.

Sample of open-ended responses when invited to comment about overall perception of Ahpra and/or the

National Board (full list of responses provided separately)

I wish the PBA was a bigger voice in lobbying for the profession. There is a lot of apathy and discontent in the profession, and it feels like the head of pharmacy don't care. Particularly in areas such as pharmacists prescribing, a statement was released, but no action appears to be occurring from the PBA. PBA should be more actively involved in pharmacists having more access to the MBS and also pharmacists practising in areas such as GP clinics and nursing homes. PBA should also be doing more to push against the "discount" model of pharmacy which is being promoted, which is at times putting our quality and professionalism to question.

Ahpra are particularly difficult to deal with. When your livelihood is at stake and potentially being able to put food on the table, they have little empathy.

Yes, especially in the case of pharmacy location rules which are continually being exploited by some sections of the profession due to ambiguous rules and loopholes. Also, how can corporate pharmacy be alive and well while being illegal.

Be more open about what you actually do and where the \$300-400 you take from each health practitioner each year goes. Currently the vast majority thinks Ahpra is useless and is thinking "what do they actually do for us".

Ahpra needs to keep in mind the poor salaries of pharmacists before deciding to raise standards and registration costs.

There's so many Boards, and so many Councils and so many emails, it is difficult to work out what each is for and how important each is if you are not closely linked with them. Don't increase the number of emails or publications - too hard to keep up with them as it is - it's like all that letterbox mail we get.

It was dumb idea to make two boards from just one before. Pharmacy Board of Australia was good enough. Why did Ahpra came into existence is out of my perception. I don't think it has helped the profession by having Ahpra. It as simply increased the administration of registered health practitioner. Just more bureaucracy.

Communication is a two-way interaction. It is difficult to make comments, suggestions for improvement or change to a person who may be able to act on those suggestions. There is a barrier to communication of ideas etc from practitioners to both AHRA and the Pharmacy Board.

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