

**COMMUNITY PHARMACY SERVICES APPLICATION ASSESSMENT FORM FOR NEW LOCATION, ADDITIONAL PREMISES OR FOR NEW SERVICES WITHIN EXISTING ICPSA, INCLUDING DELIVERY OF EXISTING NATIONAL SERVICE NOT CURRENTLY PROVIDED BY THE PROVIDER**

The following grading grid should be used as guidance when assessing whether the application meets Ministry of Health - Health and Disability Services Pharmacy Service Standards 2010, Pharmacy in MidCentral Strategy, Pharmacy in MidCentral Services Overview, MidCentral DHB Community Pharmacy Quality Standards and Community Pharmacy Service requirements.

Consideration of applications for services from a new location, additional premises or new funded national services within an existing ICPSA, including delivery of existing national service not currently provided by the provider, will be guided by the criteria set out in the table in clause 6.1 as relevant. Consideration of applications for a change in location of premises will be consistent with clause B.20 of the ICPSA. MDHB will have regard to the proximity of other community pharmacies to the proposed location, needs of the providers current service users and the likely needs of the population that may be served at the proposed location. MDHB seeks to gain maximum quality improvement through any change.

For a contract to be granted, an applicant must have provided evidence for all relevant areas. If there is inadequate evidence provided but only minor issues to resolve, further information will be requested from the applicant. If no or inadequate evidence is provided in respect to an area considered relevant, with significant issues outstanding an immediate decline will result

<b>1. Character and requirements</b>		
	<b>Assessor Comments</b>	<b>Assessment (Not met, Can be met, Met, Exceeded)</b>
The following are attached: <ul style="list-style-type: none"> <li>Completed Police Check form for the Responsible Person (and evidence of ID).</li> <li>Completed Vulnerable Children Act questionnaire for Responsible Person.</li> <li>Copy of current APC for the Responsible Person.</li> <li>Evidence of support from primary care providers for the proposed location.</li> </ul>	<i>Response</i>	Met <ul style="list-style-type: none"> <li>Information attached</li> </ul> Not Met <ul style="list-style-type: none"> <li>Information not provided</li> </ul>
Confirmation that the responsible person or any of the shareholders have never had conditions imposed on their Annual	<i>Response</i>	Met <ul style="list-style-type: none"> <li>No conditions applied</li> </ul>

<p>Practicing Certificate (APC) or had an APC cancelled, or details of any conditions imposed.</p>		<ul style="list-style-type: none"> <li>• Condition applied and it relates to the Councils 'Return to Practice Policy'.</li> </ul> <p>Not Met</p> <ul style="list-style-type: none"> <li>• No response</li> <li>• Condition applied and no details provided.</li> </ul> <p>Condition applied and it does not relate to the Pharmacy Councils 'Return to Practice Policy'</p>
<p>Confirmation that the responsible person or any of the shareholders have never had conditions imposed on their Ministry of Health Pharmacy Licence or had it cancelled or details of any conditions imposed.</p>	<p><i>Response</i></p>	<p>Met</p> <ul style="list-style-type: none"> <li>• No Conditions Applied.</li> <li>• Services requested do not breach the conditions imposed.</li> </ul> <p>Not Met</p> <ul style="list-style-type: none"> <li>• No response</li> <li>• Conditions applied and no details provided.</li> <li>• Services requested breach the conditions imposed.</li> <li>• Licence Cancelled</li> </ul>
<p>Confirmation that you will provide all PHARMAC Schedule section B, C and D medications to patients if requested and required, including high cost medications (exemptions may apply as directed by MidCentral DHB or PHARMAC).</p>	<p><i>Response</i></p>	<p>Met</p> <ul style="list-style-type: none"> <li>• Confirmation</li> </ul> <p>Not Met</p> <ul style="list-style-type: none"> <li>• No response</li> <li>• No confirmation</li> </ul>
<p>A copy of a Quality Plan that demonstrates processes for continuous quality improvement (CQI) of services and ensures compliance with all legislative and professional requirements is attached.</p>	<p><i>Response</i></p>	<p>Met</p> <ul style="list-style-type: none"> <li>• Plan provided, and: <ul style="list-style-type: none"> <li>○ Outlines continuous improvement plans.</li> <li>○ Organisational structure – key contacts</li> <li>○ Copies of all APCs and certificates.</li> <li>○ Pharmacy Procedures</li> <li>○ Outlines clinical and quality reporting mechanisms (audits)</li> </ul> </li> </ul>

		<p>Can Be Met</p> <ul style="list-style-type: none"> <li>Plan provided, but:</li> <li>No clearly outlined clinical or quality reporting mechanisms (audits) or pharmacy procedures.</li> </ul> <p>Not Met</p> <ul style="list-style-type: none"> <li>No response</li> </ul>
A copy of the health and safety, adverse clinical event management process and infection control policies and procedures is attached.	<i>Response</i>	<p>Met</p> <ul style="list-style-type: none"> <li>Plan provided – actionable and identifies responsibilities under the Health and Safety at Work Act 2015.</li> <li>Identifies the correct references to the Pharmacy Standards.</li> <li>If requesting vaccination, correct cold chain supply.</li> <li>Infection control policy.</li> </ul> <p>Can be Met</p> <ul style="list-style-type: none"> <li>Plan provided, but does not identify responsibilities under the Health and Safety at Work Act 2015.</li> <li>No infection control policy</li> </ul> <p>Not Met</p> <ul style="list-style-type: none"> <li>No response</li> <li>Un-actionable Plan</li> </ul>
Confirmation that the proposed pharmacy hours of operations or services will not be decreased without written agreement of MidCentral DHB.	<i>Response</i>	<p>Met</p> <ul style="list-style-type: none"> <li>Confirmation</li> </ul> <p>Not Met</p> <ul style="list-style-type: none"> <li>No response</li> <li>No confirmation</li> </ul>
Confirmation that the proposed pharmacy location will not be moved without written agreement of MidCentral DHB. This will be	<i>Response</i>	<p>Met</p> <ul style="list-style-type: none"> <li>Confirmation</li> </ul> <p>Not Met</p>

<p>an agreed variation to the ICPSA agreement (specifically clause B.20(1).</p>		<ul style="list-style-type: none"> <li>• No response</li> <li>• No confirmation</li> </ul>
<p>Evidence of solvency is provided.</p>	<p><i>Response</i></p>	<p>Met</p> <ul style="list-style-type: none"> <li>• Letter of solvency provided</li> </ul> <p>Not Met</p> <ul style="list-style-type: none"> <li>• No response</li> </ul>
<p>Major incident and emergency and Business Continuity Plans are provided.</p>	<p><i>Response</i></p>	<p>Met</p> <ul style="list-style-type: none"> <li>• Plan provided, and: <ul style="list-style-type: none"> <li>○ Clearly outlines local contingency planning.</li> <li>○ Key contacts identified.</li> <li>○ Clearly outlines how the pharmacy will continue to offer services in the event of a major incident.</li> </ul> </li> </ul> <p>Can be Met</p> <ul style="list-style-type: none"> <li>• National rather than local plan provided.</li> <li>• Plan provided does not clearly outline contingency planning.</li> </ul> <p>Not Met</p> <ul style="list-style-type: none"> <li>• No response</li> </ul>
<p>Confirmation that you will be a member of the MidCentral Community Pharmacy Group (MCPG) and provide services currently contracted through the MCPG</p>		<p>Met</p> <ul style="list-style-type: none"> <li>• Confirmation</li> </ul> <p>Not Met</p> <ul style="list-style-type: none"> <li>• No response</li> <li>• No confirmation</li> </ul>

## 2. Strategic alignment

	Assessor comments	Assessment (Not met, Can be met, Met, Exceeded)
<p>Describe how your pharmacy supports the Pharmacy Action Plan and Pharmacy in MidCentral Strategy – providing best practice advice and service so that the people of MidCentral achieve better health outcomes – People Centric, Best Practice, Better Health Outcomes</p>	<p><i>Response</i></p>	<p>Met</p> <ul style="list-style-type: none"> <li>• Clearly identifies how they will promote best practice and provide services that target addressing inequities and better health outcomes.</li> <li>• Aligns with the ‘WHY’ of Pharmacy in MidCentral.</li> <li>• A focus on quality and innovation.</li> </ul> <p>Can be Met</p> <ul style="list-style-type: none"> <li>• A focus on quality and innovation.</li> <li>• Clearly identifies how they will promote best practice and provide services that target better health outcomes – no mention on inequities.</li> </ul> <p>Not Met</p> <ul style="list-style-type: none"> <li>• No response</li> <li>• A focus on profit building</li> <li>• No focus on quality of service</li> </ul>
<p>Describe, referencing your Quality Improvement Plan, how you will provide people-centric care as per the Pharmacy in MidCentral Strategy and MidCentral DHB Community Pharmacy Quality Standards</p>	<p><i>Response</i></p>	<p>Met</p> <ul style="list-style-type: none"> <li>• A focus on the patient and their experience: <ul style="list-style-type: none"> <li>○ Cultural responsiveness.</li> <li>○ Remaining professional at all times.</li> <li>○ Right medications, right time.</li> <li>○ Hours of operation of service do not fluctuate without notice.</li> <li>○ Giving the correct advice to every patient.</li> </ul> </li> </ul>

		<p>Can be Met</p> <ul style="list-style-type: none"> <li>• Not clearly articulated ideas on how they will provide people-centric care.</li> </ul> <p>Not Met</p> <ul style="list-style-type: none"> <li>• No response</li> <li>• A focus on profit building</li> <li>• No focus on quality of service</li> </ul>
<p>Describe how your pharmacy will focus on wellness, preserving mana, and build on existing strengths of whānau, communities, and population groups, in particular how:</p> <ul style="list-style-type: none"> <li>• Pharmacy services will be delivered with recognition of the importance of Māori values and beliefs thus ensuring the rights of Māori consumers and whānau are respected.</li> <li>• Pharmacy services will maximise opportunities to meet needs of higher need population groups that include the elderly and those receiving mental health and addiction services.</li> </ul>	<p><i>Response</i></p>	<p>Met</p> <ul style="list-style-type: none"> <li>• Clearly identifies a structure that enables patient and whānau involvement.</li> <li>• A focus on supporting health and wellbeing through health promotion, and the principles of Whānau Ora.</li> <li>• A focus on increasing health literacy – ownership of their health.</li> <li>• Clearly identifies ongoing training of staff to better serve the population.</li> </ul> <p>Can be Met</p> <ul style="list-style-type: none"> <li>• Not clearly articulated ideas on how they will partner with people and whānau to support health and wellbeing.</li> </ul> <p>Not Met</p> <ul style="list-style-type: none"> <li>• No response</li> <li>• Co-located with services that do not promote better health outcomes.</li> </ul>
<p>Describe how your pharmacy will improve health outcomes and achieve equity for all populations, in particular how:</p> <ul style="list-style-type: none"> <li>• The Pharmacy service supports, the provision of equitable pharmacy</li> </ul>	<p><i>Response</i></p>	<p>Met</p> <ul style="list-style-type: none"> <li>• Equity Plan provided, and: <ul style="list-style-type: none"> <li>○ It clearly identifies the priority populations for</li> </ul> </li> </ul>

<p>services across the total MidCentral district.</p> <ul style="list-style-type: none"> <li>• The Pharmacy service design enables individuals, whānau and families to obtain, process and understand basic health information and services needed to make informed and appropriate health decisions.</li> </ul>		<p>MidCentral District Health Board.</p> <ul style="list-style-type: none"> <li>○ Aligns to the principles of Whānau Ora.</li> <li>○ It outlines how the service will address the inequities in healthcare in the MidCentral population.</li> </ul> <p>Can be Met</p> <ul style="list-style-type: none"> <li>• Equity plan provided but does not outline how the service will target inequities or align to the principles of Whānau Ora.</li> </ul> <p>Not Met</p> <ul style="list-style-type: none"> <li>• No response</li> </ul>
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<b>3. Access</b>		
	<b>Assessors Comments</b>	<b>Assessment (Not met, Can be met, Met, Exceeded)</b>
<p>Describe the population you are intending to service and the services intended to provide. Outline the unmet needs you have identified or improvements/innovations your services will make for patients. Ensure all contractual obligations for provision of medicines are covered.</p>	<p><i>Response</i></p>	<p>Met</p> <ul style="list-style-type: none"> <li>• Clearly identified need in the population and supported by evidence.</li> <li>• Clearly identified need in the population that requires immediate action.</li> <li>• Clearly identifies how the need will be met through the provision of services.</li> <li>• Clearly outlines the benefits to the patients.</li> </ul> <p>Can be Met</p> <ul style="list-style-type: none"> <li>• Clearly identified need in the population but no supporting evidence provided.</li> </ul>

		<ul style="list-style-type: none"> <li>Clearly identified need in the population, however 'in the long term'.</li> <li>No articulation of how the need will be met or benefits to patients.</li> </ul> <p>Not Met</p> <ul style="list-style-type: none"> <li>No response</li> <li>No clearly defined need for the service in MidCentral.</li> <li>No description of how the patients will benefit from the contract being provided.</li> </ul>
<p>List the services that you intend to provide to meet the needs and unmet needs of the population you intend to serve and in particular:</p> <ul style="list-style-type: none"> <li>Describe opportunities for improving access to pharmacy services;</li> <li>The free and timely access to pharmacist advice as a function of the provision of funded services; and,</li> <li>A dispensing pharmacy service providing all medicines as required per contract, supported by appropriate stock and procedures.</li> </ul>		<p>Met</p> <ul style="list-style-type: none"> <li>Describes opportunities for improving access to pharmacy services</li> <li>Describes comprehensive primary care pharmacy service.</li> <li>Identifies comprehensive range of services and provision of all medicines required per contract</li> </ul> <p>Can be Met</p> <ul style="list-style-type: none"> <li>Identifies unmet needs but no action.</li> </ul> <p>Not Met</p> <ul style="list-style-type: none"> <li>No response</li> </ul>
<p>A simple plan of your facility describing the purpose of each area in relation to the services identified above is attached. The plan should identify the private consulting room and how this is accessed (where other clients in the pharmacy cannot overhear service-related conversations, disability access etc).</p>	<p><i>Response</i></p>	<p>Met</p> <ul style="list-style-type: none"> <li>Plan provided, and: <ul style="list-style-type: none"> <li>The description must be specific and include the area(s) the pharmacy occupies.</li> <li>Clearly identified private consulting room (if required).</li> </ul> </li> </ul> <p>Can be Met</p> <ul style="list-style-type: none"> <li>Plan provided, but:</li> </ul>



		<ul style="list-style-type: none"> <li>○ No clearly identified space</li> <li>○ No private consulting room but provisions for privacy made.</li> </ul> <p>Not Met</p> <ul style="list-style-type: none"> <li>• No response</li> <li>• No private consulting room and no provisions for privacy made</li> </ul>
<p>List the other pharmacies within 5km of the proposed location explain how the proposed pharmacy will add value to the existing services being provided.</p>	<p><i>Response</i></p>	<p>Met</p> <ul style="list-style-type: none"> <li>• No Pharmacies within 5km</li> <li>• Pharmacies within 5km but a robust explanation of how the proposed contract will add value to the existing services: <ul style="list-style-type: none"> <li>○ Supporting evidence provided</li> <li>○ Related to addressing inequities</li> <li>○ Within funding provisions</li> </ul> </li> </ul> <p>Can be Met</p> <ul style="list-style-type: none"> <li>• Pharmacy within 5km that do not provide proposed services.</li> <li>• Pharmacy within 5km that do provide proposed services but there is a significant unmet need.</li> </ul> <p>Not Met</p> <ul style="list-style-type: none"> <li>• No response</li> <li>• Pharmacy within 5km that provides proposed services and no unmet need.</li> </ul>
<p>What are your proposed days and hours of operation?</p> <ul style="list-style-type: none"> <li>• <b>Note applicant must mention if after-hours fees are going to be charged</b></li> </ul>	<p><i>Response</i></p>	<p>Met</p> <ul style="list-style-type: none"> <li>• Opening hours reflect community need</li> <li>• Opening hours increase current access provided</li> </ul> <p>Can be Met</p> <ul style="list-style-type: none"> <li>• Plan provided, but:</li> </ul>

		<ul style="list-style-type: none"> <li>• Non-actionable or insufficient</li> </ul> <p>Not Met</p> <ul style="list-style-type: none"> <li>• Opening hours do not reflect community need</li> <li>• Opening hours to not enhance current access</li> <li>• Note mention of afterhours fees will impact on access and equity for under-served and priority populations – consider this with community pharmacy is serving</li> </ul>
Describe how you will serve people with difficulty accessing services.		

<b>4. Resourcing</b>		
	<b>Assessors comments</b>	<b>Assessment (Not met, Can be met, Met, Exceeded)</b>
The staffing plan and profile is attached.	<i>Response</i>	<p>Met</p> <ul style="list-style-type: none"> <li>• Plan provided, and: <ul style="list-style-type: none"> <li>○ Description of staff numbers appears realistic for operating hours, services delivered.</li> <li>○ Suitable ratio of pharmacists to technicians</li> <li>○ Indication of if / when business will train intern and/or technician including (supported with sufficient pharmacists on staff)</li> </ul> </li> <li>• Where multiple enhanced services are provided, pharmacist staff numbers and rostering demonstrate that multiple pharmacist are on duty to avoid untimely service delivery.</li> <li>• Description of employing additional pharmacists to provide enhanced</li> </ul>

		<p>services e.g. MUR service provided by contractor pharmacist to specifically provide this service without impact on quality of other services</p> <ul style="list-style-type: none"> <li>• Description of roster included multiple pharmacists to ensure timely service provision e.g. multiple pharmacists in morning for OST service, multiple pharmacists on duty in afternoon for ARRC.</li> </ul> <p>Can be Met</p> <ul style="list-style-type: none"> <li>• Plan provided, but does not clearly identify workforce requirements.</li> </ul> <p>Not Met</p> <ul style="list-style-type: none"> <li>• No response</li> <li>• Insufficient FTE</li> <li>• High number of enhanced services to be provided with low pharmacist employees for opening hours, indicating potential for significant consumer waiting to access service or advice.</li> </ul>
<p>The workforce development plan identifying how staff will be provided with on-going training to maintain competency is attached.</p>	<p><i>Response</i></p>	<p>Met</p> <ul style="list-style-type: none"> <li>• Plan provided that provides confidence staff competence will be maintained, and staff developed to sustain resourcing</li> </ul> <p>Can be Met</p> <ul style="list-style-type: none"> <li>• Plan provided, but does not clearly identify workforce development.</li> </ul> <p>Not Met</p> <ul style="list-style-type: none"> <li>• No response</li> <li>• Insufficient information to provide confidence.</li> </ul>

## 5. Holistic approach

	Assessors comments	Assessment (Not met, Can be met, Met, Exceeded)
<p>Describe how your pharmacy will participate in local/national health promotion initiatives and/or other pharmacy initiatives?</p>	<p><i>Response</i></p>	<p>Met</p> <ul style="list-style-type: none"> <li>• Health promotion plan that identifies how pharmacy will participate in initiatives</li> </ul> <p>Can be Met</p> <ul style="list-style-type: none"> <li>• Commitment to participate in health promotion initiatives without any plan</li> </ul> <p>Not Met</p> <ul style="list-style-type: none"> <li>• No response</li> </ul>
<p>Describe how your proposed pharmacy will engage with co-located and nearby services and facilities promoting better population health outcomes, such as healthy eating, healthy exercise, social inclusion, etc.</p>	<p><i>Response</i></p>	<p>Met</p> <ul style="list-style-type: none"> <li>• Information provided about co-located and nearby services and facilities relating to better population health outcomes and how the pharmacy will engage with them to improve health outcomes.</li> </ul> <p>Can be met</p> <ul style="list-style-type: none"> <li>• Co-located or nearby services and activities identified but no engagement identified.</li> </ul> <p>Not met</p> <ul style="list-style-type: none"> <li>• No response</li> </ul>
<p>Describe how your proposed pharmacy will reduce or mitigate the adverse health impact of any co-located and nearby services and facilities relating to alcohol and tobacco sales, gambling facilities, or other services that</p>	<p><i>Response</i></p>	<p>Met</p> <ul style="list-style-type: none"> <li>• Information provided about co-located or nearby services that contribute to negative health</li> </ul>

<p>contribute to poorer population health outcomes.</p>		<p>outcomes and mitigation actions identified.</p> <ul style="list-style-type: none"> <li>No co-located or nearby services that contribute to negative health outcomes</li> </ul> <p>Can be met</p> <ul style="list-style-type: none"> <li>Co-located or nearby services and activities identified but no mitigation actions identified.</li> </ul> <p>Not met</p> <ul style="list-style-type: none"> <li>No response</li> </ul>
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<h2>6. Integrated patient care</h2>		
	<p><b>Assessors comments</b></p>	<p><b>Assessment (Not met, Can be met, Met, Exceeded)</b></p>
<p>Describe the collaboration you have had in previous community pharmacies (or that you have now) which you may have owned/managed and what engagement you have already had with primary care providers, PHOs or other community providers in the area.</p>	<p><i>Response</i></p>	<p>Met</p> <ul style="list-style-type: none"> <li>Evidence of collaboration provided.</li> <li>If no previous evidence, supporting documents provided of primary care and community engagement.</li> </ul> <p>Can be Met</p> <ul style="list-style-type: none"> <li>Supporting documents are anecdotal only with no evidence of engagement with primary care or community.</li> </ul> <p>Not Met</p> <ul style="list-style-type: none"> <li>No response</li> <li>No evidence or supporting documents.</li> </ul>

<p>Describe working with primary care providers, Integrated Family Health Centres and GP Teams to support better health outcomes, including sharing information</p>		<p>Met</p> <ul style="list-style-type: none"> <li>Clearly identified commitment with actions.</li> <li>Describes opportunities for improving sharing information.</li> </ul> <p>Can be Met</p> <ul style="list-style-type: none"> <li>Clearly identified commitment but no identification of actions provided.</li> <li>No articulation of opportunities for improving information sharing.</li> </ul> <p>Not Met</p> <ul style="list-style-type: none"> <li>No response</li> </ul>
<p>Describe how you will engage with population groups with greater needs, including the elderly and those receiving mental health and addiction services.</p>	<p><i>Response</i></p>	<p>Met</p> <ul style="list-style-type: none"> <li>Clearly identified engagement plan.</li> <li>Describes plan and process for engaging with high need population groups.</li> </ul> <p>Can be Met</p> <ul style="list-style-type: none"> <li>Clearly identified commitment but no identification of actions provided.</li> <li>Commitment but no articulation of opportunities for engaging.</li> </ul> <p>Not Met</p> <ul style="list-style-type: none"> <li>No response</li> </ul>
<p>Describe how will you consider the aspirations of Māori, and meet the needs of Māori in relation to the delivery of services.</p>		<p>Met</p> <ul style="list-style-type: none"> <li>Plan provided.</li> <li>Describes plan and process for identifying the aspirations of Māori, and meeting their needs.</li> </ul> <p>Can be Met</p>

		<ul style="list-style-type: none"> <li>Clearly identified commitment but no identification of actions provided.</li> <li>Commitment but no articulation of opportunities for engaging.</li> </ul> <p>Not Met</p> <ul style="list-style-type: none"> <li>No response</li> </ul>
Outline the strategies you will use to ensure that you are engaging with consumers in providing holistic services that address the physical, emotional, social, spiritual and intellectual aspects of health.	<i>Response</i>	<p>Met</p> <ul style="list-style-type: none"> <li>Identifies holistic service looking at whole person.</li> <li>Consumer engagement strategy provided</li> <li>Has gone beyond minimum ICPSA requirements e.g. peer groups, consumer engagement meetings,</li> <li>Can describe how will respond to feedback and inform community of results</li> </ul> <p>Can be Met</p> <ul style="list-style-type: none"> <li>Plan is unclear or incomplete</li> </ul> <p>Not Met</p> <ul style="list-style-type: none"> <li>No Consumer engagement strategy provided</li> <li>No discussion on responding to feedback or sharing with community.</li> </ul>

<b>7. Systems and processes</b>		
	<b>Assessors comments</b>	<b>Assessment (Not met, Can be met, Met, Exceeded)</b>
Outline the proposed IT setup and intended approach to ensuring communication with key providers in the primary care team.	<i>Response</i>	<p>Met</p> <ul style="list-style-type: none"> <li>Privacy and confidentiality considerations outlined.</li> <li>Integration with Primary Care providers</li> </ul>

		<p>Can be Met</p> <ul style="list-style-type: none"> <li>No integration with primary care</li> </ul> <p>Not Met</p> <ul style="list-style-type: none"> <li>No response</li> </ul>
Describe how you plan to use technology/online services to support integrated care.	<i>Response</i>	<p>Met</p> <ul style="list-style-type: none"> <li>Identifies integration with primary care PMS systems.</li> <li>Identifies use of NZePS.</li> <li>Outlines future proofing requirements – increased robotics, enhanced pharmacy cloud based software.</li> </ul> <p>Can be Met</p> <ul style="list-style-type: none"> <li>No outline of future proofing requirements.</li> </ul> <p>Not Met</p> <ul style="list-style-type: none"> <li>No response</li> <li>Un-actionable Plan</li> </ul>
Describe how you plan to use Pharmacy dispensary software for patient care and safety – such as your commitment to utilise fully national databases to obtain and update patient information e.g. National Immunisation Register, NHI look up system for prescription subsidy scheme, and to provide this at no charge to consumers.	<i>Response</i>	<p>Met</p> <ul style="list-style-type: none"> <li>Listed Tonic, Rxone, or another pharmacy software system</li> <li>Clear description of how this system will support patient care</li> <li>Clear description of how this system will support safety</li> <li>Standard operating procedures (SOP) outlining maintenance of medicine profile.</li> <li>Provision of pharmacist intervention SOP</li> <li>SOP documentation that CARM recording will be standard practice</li> <li>Not applicable – applicant will not be providing a dispensing service</li> </ul> <p>Can be Met</p>



		<ul style="list-style-type: none"> <li>• Inadequately described</li> <li>• Lack of suitable documentation provided to enable assessment</li> </ul> <p>Not Met</p> <ul style="list-style-type: none"> <li>• No response</li> <li>• Un-actionable Plan</li> </ul>
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<b>Attachments checklist</b>	√
Completed Police Check form for the Responsible Person (and evidence of ID).	
Completed Vulnerable Children Act questionnaire for Responsible Person.	
Copy of current APC for the Responsible Person	
Evidence of support from primary care providers for the proposed location	
Quality Plan	
Health and safety, adverse clinical event management process and infection control policies and procedures	
Evidence of solvency	
Major incident and emergency plan and Business Continuity Plan	
Facility plan	
Staffing plan and profile	
Workforce development plan	
Agreements and Acknowledgements signed	