



Government of **Western Australia**
Department of **Health**

Novel coronavirus (COVID-19) pandemic

Guidance for community pharmacies

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Purpose

This publication provides advice and information to community pharmacies to enable them to operate safely and effectively and minimise disruption to services during the COVID-19 pandemic.

This guidance is relevant to all community pharmacies in Western Australia. The Department of Health recognises that every community pharmacy is unique and that there will be the need to adapt and implement this advice taking into consideration individual circumstances.

This guidance does not replace the need for pharmacists and community pharmacies to exercise professional judgement and comply with relevant laws and professional standards.

The Pharmaceutical Society of Australia (PSA) and The Pharmacy Guild of Australia (PGA) have produced other COVID-19 information for community pharmacy, including more detailed operational information and resources which is available on their websites.

Background

Community pharmacies are an essential public service; providing readily accessible healthcare advice and supply of prescription and other medicines to the broad population.

Community pharmacists are often the first professional point of contact within the health system for people seeking information about health-related concerns.

During the current crisis community pharmacies have roles in managing the COVID-19 pandemic whilst also ensuring ongoing provision of business-as-usual services.

This includes:

- Ensuring a safe environment for both the public and pharmacy staff
- Timely and appropriate referral of patients presenting at the pharmacy with potential COVID-19 symptoms
- Informing, counselling and educating the public about disease prevention and infection control
- Stock management and maintenance of supply of prescription medicines and devices, other pharmacy medicines and infection control items.

Considerations for community pharmacies

Pharmacy staff should be made aware of the current guidance and case definitions for COVID-19. Current information about COVID-19 issued by WA Health is available at: https://ww2.health.wa.gov.au/Articles/A_E/Coronavirus

Suspect and probable case definitions, testing criteria and clinical guidelines are changing rapidly; please refer to the most recently available information available at: https://ww2.health.wa.gov.au/Articles/A_E/Coronavirus/COVID-19-clinical-alerts.

Ensuring a safe environment

To reduce the risk of infection transmission within pharmacies it is important to minimise time of exposure and contact between patients and pharmacy staff.

General measures:

- Position patient information posters so they can be easily seen and read by patients **before** they enter premises and at key locations within the pharmacy
- Signage (posters, billboards etc.) outside the pharmacy should clearly display a telephone number so that people who are unwell can call the pharmacy rather than enter the store. Poster and signage resources:
 - PSA COVID-19 resources [link](#)
 - PGA COVID-19 resources [link](#)
 - The Commonwealth Department of Health has COVID-19 resources which are available in different languages [link](#)
- Signage outside the pharmacy should indicate the maximum number of customers allowed in the store according to the current one person per 4m² restrictions. The calculation of the maximum number of people allowed in the pharmacy at any one time must include pharmacy staff
- Consider appointing a member of staff to 'triage' and advise patients and to control numbers of people entering the pharmacy
- Patients 'ringing ahead' who have symptoms of respiratory illness should be advised NOT to attend the pharmacy and to contact their GP or the Coronavirus Health Information Line on 1800 020 080 for advice
- Where possible create one entrance and one exit and encourage one-way traffic through the pharmacy. Use tape to cordon off areas and floor markers to direct patients and indicate 1.5m spacing between people in queues
- The best way to reduce the risk of infection is good hygiene including regular hand washing, using alcohol-based hand sanitisers and avoiding direct or close contact with others
- Within the pharmacy, people should be advised to keep a distance of 1.5m from others
- Pharmacy staff do NOT need to wear face masks as a routine precaution. Masks worn all day long are unlikely to be effective and may result in more face touching
- Protective gloves are NOT recommended as they do not protect against transmission of the virus following physical contact with patients or surfaces and may impair the requirement for frequent hand washing or use of hand sanitisers. Protective gloves used when touching patients during examination or during vaccine administration should be disposed after each individual patient contact
- Pharmacy staff should implement procedures for regular cleaning and disinfecting of the working environment (see below)
- Encourage customers use of contactless payment methods to minimise the handling of cash within the pharmacy

- Home deliveries of medicines and other items is encouraged, especially for high risk patients and patients in quarantine or isolation. The [COVID-19 Home Medicines Service](#) is available for vulnerable people in the community, including those in self-isolation, to order and receive their PBS/RPBS medicines at home
- Advise patients where possible to order ahead over the phone and to wait outside of the pharmacy to be contacted by phone when the prescription is ready for collection
- Patients attending pharmacies with prescriptions should wait outside the store while prescriptions are being dispensed
- Where possible, deliveries to the pharmacy should be done without external parties entering the pharmacy, or at least the non-public areas of the pharmacy
- Consider allocating a room or area within the store where people presenting with symptoms and who are unable to travel or who become critically ill, can be held whilst arrangements for transfer are made.

Principles of infection prevention and control in community pharmacy

- Promote good cough etiquette and respiratory hygiene
 - Keep distance where possible with people who have influenza-like symptoms
 - Cover coughs and sneezes with disposable tissues or clothing (e.g. into elbow)
 - Dispose of used tissues, and clean hands afterwards
- Promote regular and thorough hand-hygiene by staff and patients
 - Hand hygiene kills the virus on hands and prevents the spread of COVID-19
 - Hand hygiene can be done using soap and water or a waterless alcohol hand rub/foam for at least 20 seconds
- Keep the environment clean
 - Contamination on surfaces touched by staff and patients should be minimised
 - Sick staff members should remain at home
- For patients
 - Display signage/posters in the pharmacy to encourage patients to practice hand hygiene, cough etiquette and respiratory hygiene
 - Put alcohol-based hand rub dispensers in prominent places around the pharmacy especially at counters where surfaces are touched
 - Use social distancing of 1.5m where possible. Speak to patients from a safe distance to avoid contact with respiratory droplets
- For pharmacy staff
 - Ensure staff have access to handwashing facilities and alcohol-based hand rub
 - Staff with respiratory symptoms or fever should stay at home
- Social distancing should be used where practicable
 - Within a pharmacy environment this means attempting to keep a distance of 1.5m between all people and ensuring that the current limit of one person per 4m² is not exceeded
 - Use floor markers to indicate appropriate distances to separate people in queuing areas
 - Speak to patients from the other side of a counter or desk where possible
 - Where possible, physical barriers between pharmacy staff and patients e.g. Perspex screens on counters may afford extra protection against virus transmission in busy areas

- Pharmacists undertaking direct clinical services (e.g. vaccinations) may wish to consider the use of additional personal protective equipment (PPE) such as a mask and gloves when seeing at risk patients.

Cleaning using a detergent and disinfectant:

- Regular environmental cleaning in the pharmacy is important for reducing the risk of transmission of pathogenic organisms
- Pharmacy staff can ensure that the pharmacy is clean and hygienic by cleaning surfaces using a detergent and disinfectant. This can be either by a 2-step cleaning/disinfecting process or using a product that combines both steps
- Using a detergent:
 - A detergent facilitates the removal of dirt and organic matter
 - Most hard surfaces including counters can be adequately cleaned with warm water and a neutral detergent as per the manufacturer's instructions
 - Allowing the cleaned surfaces to dry is an important aspect of cleaning
 - Routine cleaning of floors with detergent and water is recommended
- The Therapeutic Goods Administration (TGA) suggests that disinfectants containing \geq 70% alcohol, quaternary ammonium (e.g. benzalkonium chloride) or diluted household bleach are suitable for use – refer to <https://www.tga.gov.au/appropriate-use-disinfectants-information-consumers-health-professionals-and-healthcare-facilities> for further information about the use of disinfectants.

Waste Management

- Ensure closed bins are provided for safe disposal of tissues by staff and patients
- There are no special controls required for disposing of waste - follow routine processes for disposal.

Management of patients presenting with symptoms of COVID-19

- Anyone presenting at the pharmacy with symptoms of respiratory tract infection should self-identify through use of signage or 'triage' by a staff member before entering the pharmacy. Symptomatic patients should NOT enter the pharmacy.
- Symptoms of COVID-19 may include:
 - Fever (note: fever does not occur in all cases)
 - Fatigue
 - Sore throat
 - Cough
 - Shortage of breath
 - Pneumonia
 - Diarrhoea
- Symptomatic patients should be given a surgical/procedural mask (if available) to wear during the pharmacy visit and advised to return home to self-isolate and contact the Coronavirus Health Information Line on 1800 020 080.
- If it is necessary to provide care to any patient who is a suspect or confirmed case of COVID-19 then staff should use contact and droplet precautions as a minimum. This includes the use of gloves, surgical mask, apron/gown and eye protection – refer to <https://www.health.gov.au/resources/publications/interim-advice-on-non-inpatient-care-of-persons-with-suspected-or-confirmed-coronavirus-disease-2019-covid-19-including-use-of-personal-protective-equipment-ppe>

- **The pharmacy does NOT need to automatically close if a potential COVID-19 patient enters the pharmacy**
- Staff do not automatically need to be off work if they are in contact with a COVID-19 patient - risk assessment should include the extent of exposure and the need to maintain essential services. For further advice on when health care workers should be restricted from work refer to:
https://www.health.gov.au/sites/default/files/documents/2020/03/coronavirus-covid-19-information-on-work-attendance-and-testing-for-health-and-residential-aged-care-workers_0.pdf
- Patients presenting with symptoms who are too unwell to travel or who become critically ill should be invited into a designated isolation place and advised to call the Coronavirus Health Information Line on 1800 020 080 **or an ambulance if they have severe symptoms such as difficulty breathing.** In an emergency, if entry into the isolation place or contact with the patient is unavoidable, members of staff should wear personal, protective equipment such as a face mask, gloves and an apron which should then be disposed. Following patient transfer the isolation area and any other parts of the store where the patient has been should be closed off and cleaned with detergent and disinfectant
- Stocks of PPE continue to be limited due to high global demand associated with COVID-19. Primary health care providers, including community pharmacies are required to source PPE through their normal or alternative suppliers. The Commonwealth Department of Health has distributed some PPE to the WA Primary Health Alliance (WAPHA). Primary health care providers who are unable to obtain supply of PPE through their usual suppliers, may contact [WAPHA](#) for assistance.

Patient information about disease prevention and infection control

Health professionals, including pharmacists, are key to promoting calm, constructive change while avoiding panic in response to COVID-19. Key messages for patients include:

- Modifying individual and community behaviour is essential to reduce transmission
- There is a need to find a balance between disease control and economic/societal disruption
- Patients should be advised to contact the Coronavirus Health Information Line on 1800 020 080 for advice about self-protection and protecting others including when to self-isolate or quarantine and when they may need to attend a COVID-19 clinic for testing.
- How it is spread:
 - The virus is thought to spread mainly from person-to-person between people who are in close contact with one another (within about 1.5m), through respiratory droplets produced when an infected person coughs or sneezes
 - These droplets can land in the mouths or noses of people who are nearby or possibly be inhaled into the lungs
 - People are thought to be most contagious when they are most symptomatic (the sickest)
 - Some spread might be possible before people get sick. Although there have been reports of this occurring with this new coronavirus, it is not thought to be the main way the virus spreads
 - It may be possible that a person can get COVID-19 by touching a surface or object that has the virus on it and then touching their own mouth, nose, or possibly their eyes - environmental disinfection is therefore recommended.

Influenza Vaccination

- Influenza vaccination is an important measure to prevent influenza and is especially important during the COVID-19 pandemic, particularly for healthcare workers and at-risk people. All pharmacy staff should be encouraged to have an early influenza vaccination
- Pharmacists in Western Australia are authorised to administer influenza vaccine to anyone aged 10 years or older
- In 2020, influenza vaccines funded through the **National Immunisation Program (NIP)** (not delivered via community pharmacists) are available to the following groups:
 - All people aged 6 months to < than 5 years
 - All Aboriginal and Torres Strait Islander people aged 6 months and over
 - Pregnant women
 - All people aged 65 years and over
 - People aged 6 months and over with medical conditions which increase the risk of influenza disease complications.
- Fluvad Quad® is the recommended vaccine for people who are aged ≥ 65 years. From 1 April 2020, community pharmacists registered in the 'pharmacist influenza vaccination trial' will be able to order NIP Fluvad Quad® from the wholesaler that they nominated during their registration
- This year it is critically important that we protect our seniors from influenza and reduce influenza transmission
- Promoting influenza vaccinations is a direct way for community pharmacies to help flatten the curve of respiratory illnesses
- Some at-risk groups receiving early vaccination (e.g. pregnant women and people aged 65 years and older) may benefit from a second dose to sustain immunity throughout the influenza season.

Managing patients attending the pharmacy for influenza vaccination

- Patients who are unwell or who have respiratory symptoms should NOT attend for influenza vaccination in pharmacy and should be referred to their GP or the Coronavirus Health Information Line on 1800 020 080 for advice
- Consider allocating special administration times (e.g. early in the day) and appointments for older people and other 'at risk' patients to minimise waiting times
- The current 1.5m and one person per 4m² social distancing rules should be maintained for patients waiting for vaccination and those in post-vaccination observation. Minimise congestion by staggering appointments, advising patients not to arrive in advance of their appointment and limiting the number of people attending (e.g. adults to attend unaccompanied and only one adult to accompany children)
- Usual community pharmacy vaccination procedures should be observed, including infection control measures. Additionally, vaccination and observation areas should be cleaned with detergent and disinfectant regularly and appointment scheduling should allow for this
- PPE additional to that normally used as part of routine immunisation services is not currently recommended. Where available, use of PPE such as a mask and gloves may be considered when vaccinating at risk patients
- Pharmacist vaccinators must continue to advise patients to remain on the pharmacy premises, so they can be observed for acute adverse events or anaphylaxis, for 15 minutes post vaccination
- Patients wishing to leave earlier than the 15 minutes observation period must be advised of the possible risks.

Managing stocks and supply of medicines, devices and infection control products

The Australian Government has advised there is currently no threat to the continuity of medicines supply in Australia. Pharmacies have a responsibility to ensure access to medicines during the pandemic and should consider allocation and management of unreasonable requests, or suspected stockpiling that could precipitate shortages.

The TGA has published information regarding medicine supply and limits at <https://www.tga.gov.au/behind-news/coronavirus-covid-19-information-medicines-and-medical-devices>. Specific advice for consumers on COVID-19 limits on dispensing and sales at pharmacies available at: <https://www.tga.gov.au/media-release/covid-19-limits-dispensing-and-sales-pharmacies>.

Pandemic and business-as-usual continuity planning

Every pharmacy should have in place a contingency plan outlining its strategies to ensure ongoing service provision following potential disruption caused by the spread of SARS-CoV-2 virus and the increased burden of COVID-19.

Managers and pharmacists-in-charge should ensure all pharmacy staff are informed about the actions being taken in response to COVID-19 and that roles and responsibilities are clearly communicated.

Consideration should be given to surge staffing and reallocation of staff duties to manage an increase in pharmacy activity that may result from COVID-19 and absenteeism as staff become unwell or need to stay home to care for family members. Strategies to minimise the risk of transmission between staff members should also be implemented.

The Pharmacy Guild of Australia has developed a [guide for community pharmacy](#) and a [pandemic preparedness checklist](#) that contain further information.

Professional services

Pharmacy activities and services that are non-essential or that require direct patient contact may need to be restricted or suspended. Consider additional protective measures when providing essential services including influenza vaccinations, that require direct patient contact, as well as dispensing and handling prescriptions, cash and other paperwork. See above for specific information about influenza vaccination services.

Signing of prescriptions

Pharmacists are reminded that there is no requirement under Western Australian law for patients/agents to sign for the receipt of prescription items. Signing for the receipt of pharmaceutical benefit scheme (PBS) items is a requirement under the *National Health Act*, however pharmacists are reminded that exemptions exist where it is not practicable to obtain the written acknowledgement of the person to whom the benefit is supplied.

The sharing of pens for signing prescriptions presents an opportunity for the spread of COVID-19. Where possible, patients or agents signing for prescriptions should be encouraged to use their own pen if they have one with them. Any pens shared between patients/agents should be cleaned between each use.

Provision for ongoing supply of prescribed medicines

The WA Chief Health Officer has issued a temporary, special authority that permits supply of Schedule 4 medicines from a pharmacy in WA in circumstances where a patient doesn't have a current prescription. See [Advice for pharmacists supplying medicines during the COVID-19 pandemic](#)

Changes to opening hours or pharmacy closure

In the event that a pharmacy needs to reduce its hours of operation or close, this should be clearly communicated to the community and relevant stakeholders including relevant regulation authorities, as quickly as possible. Collaboration with surrounding pharmacies is recommended where possible to ensure ongoing availability of pharmacy services. Pharmacies located in isolated areas should be particularly mindful of the need to ensure ongoing service provision and work in collaboration with other local health care providers where possible.

Continuity of care remains essential, particularly for the following groups of patients:

- Receiving dose administration aids (both community patients and those in Residential Aged Care Facilities)
- Receiving opioid replacement therapy
- On staged supply arrangements
- With prescriptions kept on file
- Where supply or delivery arrangements exist.

Further Information

- Australian Government Department of Health
<https://www.health.gov.au/news/health-alerts/novel-coronavirus-2019-ncov-health-alert/coronavirus-covid-19-resources>
- Government of Western Australia Department of Health
https://ww2.health.wa.gov.au/Articles/A_E/Coronavirus
- Therapeutic Goods Administration
<https://www.tga.gov.au/behind-news/coronavirus-covid-19-information-medicines-and-medical-devices>
- International Pharmaceutical Federation
<https://www.fip.org/files/content/priority-areas/coronavirus/Coronavirus-guidance-update-ENGLISH.pdf>
- Pharmaceutical Society of Australia
<https://www.psa.org.au/coronavirus/>
- Pharmacy Guild of Australia
<https://www.guild.org.au/resources/business-operations/COVID-19-Information>
- Society of Hospital Pharmacists of Australia
<https://www.shpa.org.au/covid-19>

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