

# 2019

Annual Report



**PHARMACEUTICAL SOCIETY**  
*of New Zealand Incorporated*





**The professional  
voice of pharmacy**

Ko te reo karanga o  
te rōpū kaitiaki rongoā

# 2019

## Annual Report

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IAN MCMICHAEL



## President's Report

Each day pharmacists are making a difference in their roles as frontline healthcare professionals.

It has been a year since the terrible mosque attacks in Christchurch. Immediately after the attacks, pharmacists stepped up to help the victims and to support each other, and the people in their communities. We also had the tragedy on White Island and again pharmacists were at the forefront of direct healthcare and supporting the victims and their communities. This was highlighted again when pharmacists stood up to help provide vaccinations during the measles outbreak, and again during the COVID-19 pandemic. All pharmacists deserve to be recognised and thanked for the outstanding work they do each day.

The Pharmaceutical Society of New Zealand (the Society) has had another successful and busy year, working on behalf of its members. I was honoured to be re-elected as its president by my National Executive peers in November 2019. It is a great privilege to be able to serve and at each meeting I am reminded of those past presidents and the gains which they made for pharmacy in New Zealand. It is very important for us to remember and acknowledge the past while we are looking forward.

For a second year, I have had the privilege of working with our Chief Executive, Richard Townley. I am left in amazement by his constant energy, and the wealth of knowledge which he has across the health sector. Richard leads an incredibly skilled and hard-working team, who go about their tasks of presenting New Zealand pharmacy, and advocating and lobbying to the highest levels.

We had another successful election for the Society's National Executive (executive). We welcomed Keith Crump, Sandy Bhawan and Bronwen Shepherd, who were elected to the executive. We have continued having the vice president of the Society and the Pharmacy Guild sitting on each other's executive boards. Catherine Keenan has been an active and valuable contributor. Ariel Hubbard continues to add value as the New Zealand Hospital Pharmacists' Association (NZHPA) co-opted member. This year Michael Hammond was successfully appointed as the Early Career Pharmacist (ECP) co-opted member and is already being a great champion for this group of pharmacists.

It was with sadness that Fiona Bradley had to leave the executive with her term finishing. Fiona did superb work on preparing and leading the ECP consultation report. I'm sure that Fiona will continue in many future governance roles. John Dunlop left the executive at the end of his term, and John should again be praised for the massive efforts he has made on behalf of pharmacy throughout his career. Kirsten Simonsen also retires, and Kirsten made a valuable contribution as an executive member and as treasurer. Jerome Ng also left the executive as he goes on to advance his high-powered career in the Bay of Plenty.

The greatest of joys being the President of the Society is in rewarding the achievements of individual pharmacists. At our first Society conference for many years we held a fantastic awards evening. Here we were able to honour one gold medalist, three fellows and two services to Māori award recipients.

All too often we spend time looking backwards, but like driving a car, we should spend most of our time looking forward rather than in the rear vision mirror.

We set big Key Performance Indicators (KPIs) last year:

- 1. Immunisation:** Our goal by 2025 is to have pharmacists able to provide all vaccines, funded equally the same as other health professionals. We are well on the way with this goal. During 2019, the Society worked closely with the Associate Minister of Health, Hon Julie Anne Genter and Ministry of Health staff on achieving this goal. As a result, pharmacists can now be funded for measles, mumps and rubella (MMR) vaccinations. When COVID-19 hit, the Society had been able to create the foundation, so that pharmacists were asked to provide funded vaccines to high needs patients. A great advancement.
- 2. Mental health and addiction:** Our goal is that by 2025 pharmacy provides a range of recognised clinical services within mental health and addiction. The Society has created the foundation and will continue to work and achieve this goal.
- 3. Pharmacist prescribing:** Our goal is that by 2025 there are 300 pharmacist prescribers working at the very top of their breadth of practice and that there are 800 Pharmacy Accuracy Checking Technicians (PACTs). We have had a slight increase in the numbers of both workforces. However, the Society is not satisfied with the progress. This is an area we will be working on, tirelessly, as this needs to be the future of pharmacy.

- 4. Advocacy:** Our goal is to expand the spheres of influence of the Society and of the pharmacy profession. This year the Society has been successful in being partly involved in the Integrated Community Pharmacy Services Agreement (ICPSA), National Annual Agreement Review (NAAR) and the Expert Advisory Group (EAG). In 2020 we are going to be heavily involved with lobbying the government for our profession and the services we can provide. The Society are committed to advocating for pharmacy and pharmacists to the highest levels.

I would like to thank all the members of the National Executive for their great work. Without their governance the operational arm of the Society could not perform their great services to the pharmacists, our members.

Nō reira e te whānau, tēnā koutou,  
tēnā koutou, huri noa i te whare,  
tēnā rā tātou katoa.



# Chief Executive's Report

RICHARD TOWNLEY



The Society works to its strategic intent of “shaping the future of the pharmacy profession to achieve quality patient outcomes.” The organisation and its operation is in the business of workforce support, development and growth. We are about keeping the profession strong.

To do this we are currently focussed on six key goals:

1. Strengthen the capability of pharmacists to provide high quality professional practice in the delivery of services.
2. Enable, cultivate and support innovation and medicines management in pharmacy practice.
3. Drive change to ensure pharmacists provide people-centred care across a wide range of practice settings.
4. Provide leading edge education and training for pharmacists, technicians, interns and other health professionals.
5. Develop leadership capabilities and ensure the workforce evolves to reflect future health professional requirements.
6. Promote the role of the pharmacist as the medicines expert in the healthcare team.

The Society ran two social media advertising campaigns on Facebook and You Tube, with the key message of “Get to know your pharmacist.” The campaigns were designed to promote extended pharmacy services, including the Community Pharmacy Anticoagulation Management Service (CPAMS), Medicine Use Review (MUR), flu vaccinations, and supply of selected oral contraceptives.

The Associate Minister of Health Julie Anne Genter and Society President Ian Michael jointly announced that pharmacy would now be delivering the measles, mumps and rubella (MMR) funded vaccines to prevent measles.

The Canterbury Community Pharmacy Group and the Society collaborated in bringing internationally renowned Scottish pharmacist Berni Brown on a speaking visit to New Zealand. Berni Brown spoke to the Pharmacy Sector Strategy Group (PSSG), Central Region Technical Advisory Services (TAS), Ministry of Health officials and the Minister of Health, Hon David Clark.



**PHOTO (LEFT TO RIGHT):** Andi Shirtcliffe, Ministry of Health, Richard Townley, Society Chief Executive, Sacha Jakes, Unichem Pharmacy Kilbirnie, Associate Minister of Health Julie Anne Genter and Ian McMichael, Society President.



The Society invited Ravi Sharma, Director for England from the Royal Pharmaceutical Society, to address attendees at the new look Society conference and to speak with Primary Health Organisations (PHOs), District Health Board (DHB) operatives at TAS, and Ministry of Health officials on workforce innovations in the United Kingdom (UK), including pharmacist prescribing, pharmacists in integrated care settings and pharmacist extended services.

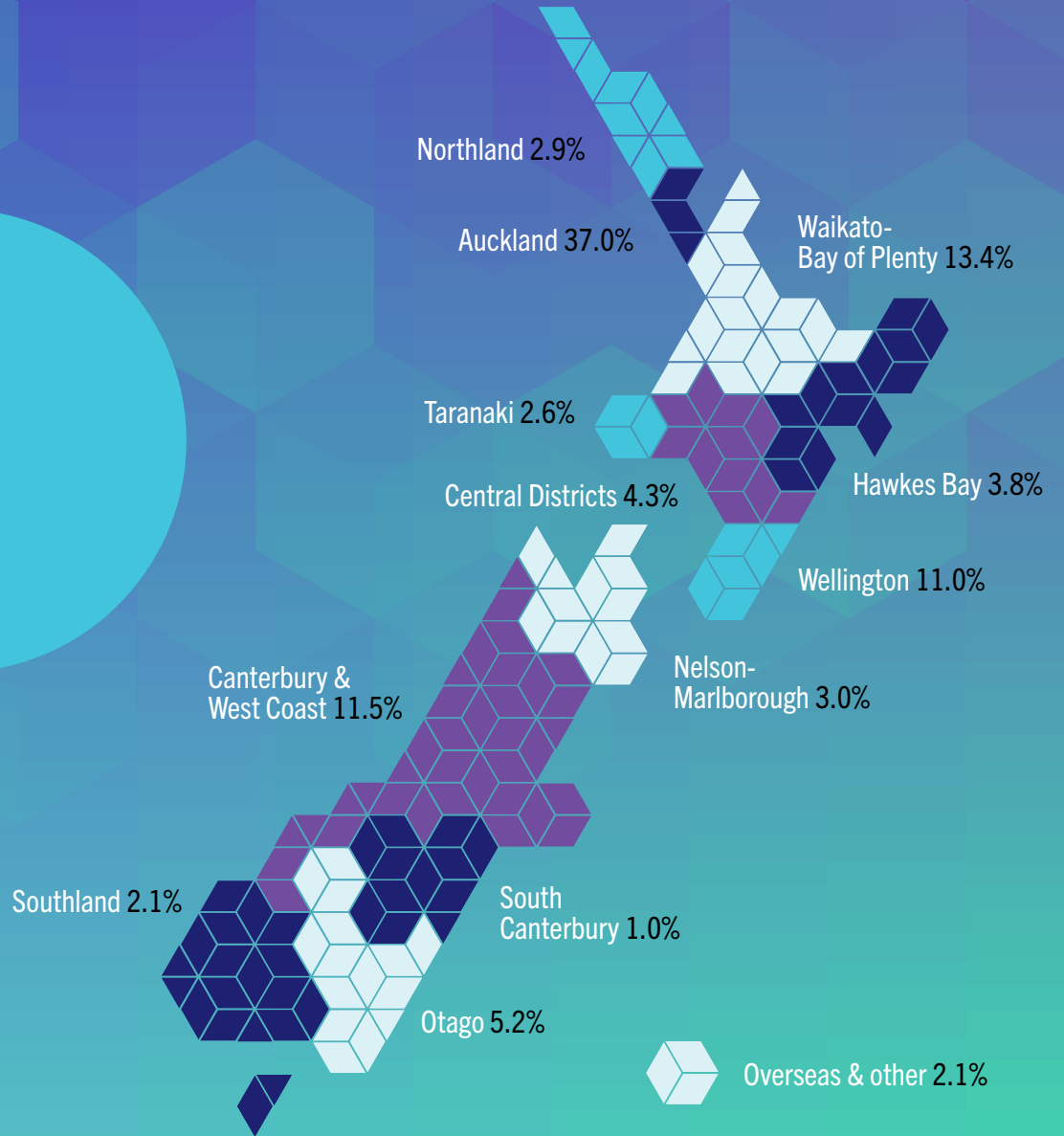
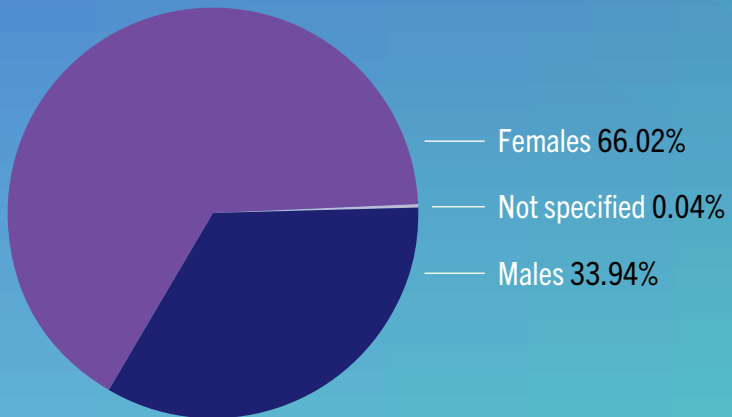
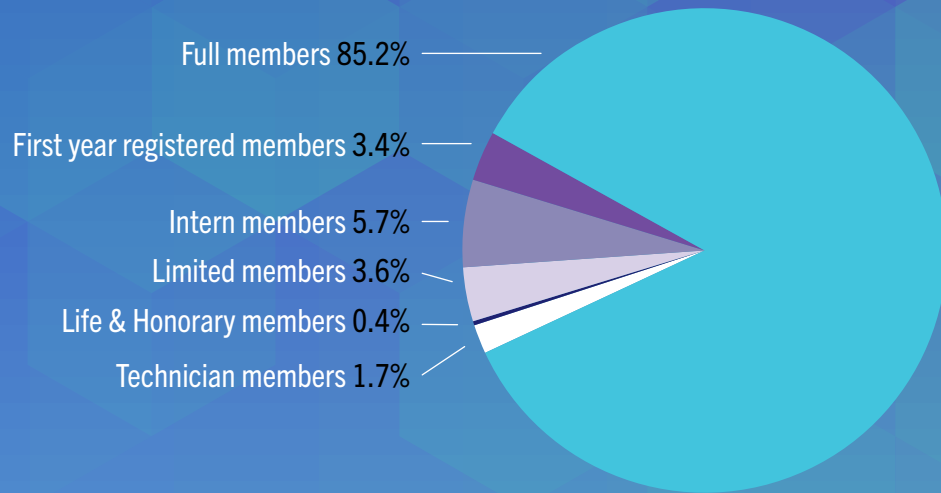
Through its provision of a chair and secretariat services, the Society has supported the PSSG and ensured the agenda includes discussion with key opinion leaders such as the Chair of the New Zealand Health and Disability Review, Heather Simpson, and Ministry of Health officials designing policy and the new legislative bill for therapeutic products.

The EVOLVE Intern Training Programme for the first time included vaccinator training by the Immunisation Advisory Centre (IMAC) to enable interns to be trained and accredited vaccinators.

During 2019 College Education and Training launched training to accredit pharmacists to supply melatonin, uric acid testing and gout management adding to established training courses that enables the supply of clozapine, selected oral contraceptives, trimethoprim, anticoagulation management testing and dose adjusting, emergency contraceptive pill and numerous other pharmacist services.

It is through the world class ENHANCE professional development programme, EVOLVE intern training programme, best practice College education and training, and expert Practice advice and support that the Society ensures the capacity, competence and capability of the profession.

# Membership





# National Executive

Governance for the organisation is provided by a seven-member elected National Executive of Society members. The current National Executive members are all registered and practising pharmacists.

The Rules of the Society also makes provision for co-opted members drawn from other organisations. In 2019 there were three co-opted members, one from New Zealand Hospital Pharmacists' Association Inc (NZHPA), one an Early Career Pharmacist and another from the medical profession. These nominated co-opted members attend all National Executive meetings.

Elections for the National Executive are held bi-annually, and members are elected for a term of 4 years.

## Elected members



**Ian McMichael** – President



**Rhiannon Braund** – Vice President



**Kirsten Simonsen** – Treasurer  
(JANUARY TO OCTOBER)



**Natalie Gauld** – Treasurer  
(NOVEMBER TO DECEMBER)



**Graeme Smith**



**Jerome Ng**  
(JANUARY TO SEPTEMBER)



**John Dunlop**  
(JANUARY TO SEPTEMBER)



**Bronwen Shepherd**  
(OCTOBER TO DECEMBER)



**Sandy Bhawan**  
(OCTOBER TO DECEMBER)



**Keith Crump**  
(OCTOBER TO DECEMBER)

## Co-opted members



**Fiona Bradley** –  
Early Career Pharmacist



**Dr Lynn McBain** –  
General Practitioner



**Ariel Hubbert** – President, New Zealand  
Hospital Pharmacists Association

## Observers



**Cameron Monteith** – Vice President,  
Pharmacy Guild of New Zealand  
(JANUARY TO MAY)



**Catherine Keenan** –  
Pharmacy Guild representative  
(JULY TO DECEMBER)

# Awards

The Society would like to congratulate all our 2019 award winners for their outstanding achievements and significant contributions to the pharmacy profession.

## Fellowships

The National Executive may designate as a Fellow of the Society any member who in their opinion has made an outstanding and significant contribution to the advancement of the practice of pharmacy in New Zealand.

Two fellowships were awarded in 2019, to Helen Margaret Dunn and Carolyn Dawn Hooper. Helen and Carolyn will be presented with their awards at the Society's Gala Awards Dinner at an appropriate time during the 2020 year.



Helen Margaret Dunn



Carolyn Dawn Hooper

## Pharmacist of the Year

The Pharmacist of the Year is awarded after nominations are considered by a panel representing the Ministry of Health, District Health Boards, New Zealand Medical Association, New Zealand Hospital Pharmacists' Association and the Society. The award carries a grant for the recipient to use for their further education or professional development.



Helen Elizabeth Cant

## Services to Māori in Pharmacy

The Award for Services to Māori in Pharmacy was created to recognise any individual working within the health sector who has performed significant work to benefit tangata whenua, reduce disparities in Māori health, enhance understanding and competence in providing services to Māori or who has been a role model for Māori involvement in pharmacy services.



J. Mary Roberts



Darryn Russell

## Honorary Membership

A posthumous honorary membership of the Society was awarded to Dr Stewart Jessamine in 2019.

Honorary Membership is awarded to individuals who are not pharmacists, and who have rendered "distinguished service to the Society or to pharmacy in New Zealand".



Dr Stewart Jessamine



## Jack Noel Henderson Scholarship

This award is made in accordance of the wishes of the late Jack Noel Henderson who bequeathed that a scholarship fund be established to assist pharmacy students who were financially disadvantaged. The amount of \$3000 is made available to the successful recipient to help cover fees and other costs related to their second year of full-time study in pharmacy.

- **Jing (Christina) Yang**
- **Lisa Rebecca Hammersley**

## Top Students

Each year the Society honours the achievement of the top students in each School of Pharmacy. Recipients receive a plaque along with a monetary award of \$500 for each Year 4 student and \$250 for each Year 3 student.

### BACHELOR OF PHARMACY – UNIVERSITY OF OTAGO

- YEAR 3 – **Georgia Bell**
- YEAR 4 – **Elizabeth Kennedy**

### BACHELOR OF PHARMACY – UNIVERSITY OF AUCKLAND

- YEAR 3 – **Jessica Boey**
- YEAR 4 – **Benjamin Moloney**

## Leadership in Pharmacy Studies

This award is presented to a Year 3 Student at Auckland University in the Bachelor of Pharmacy Programme for Leadership in Pharmacy Studies. Recipients receive a plaque along with a monetary award of \$500.

- **Oi Shan (Natalee) Zhu**



**ABOVE:** Debra Rowett

**RIGHT:** Ravi Sharma



## Conference

The Society's 2019 Conference *Towards Integrated Health* highlighted the new and rapidly developing elements of an integrated primary healthcare environment.

The conference was held on Saturday 10th and Sunday 11th August at the Waipuna Hotel and Conference Centre in Auckland.

Our two international guest speakers - Ravi Sharma, Director of England, Royal Pharmaceutical Society and Professor Debra Rowett, University of South Australia - illuminated developments happening internationally in the pharmacy profession.

Ravi's presentation gave us an insight into the future of integrated health, based on the UK experience. It was inspiring to hear about the broadening roles of pharmacists and their teams in integrated and collaborative multidisciplinary teams across various healthcare settings in the UK, and the changes we can expect to see in New Zealand.

Professor Rowett's presentation focused on inter professional practice and collaboration between multi-disciplinary teams to improve access, equity and quality of primary health care services.

The conference programme was designed to help members keep up to date with the latest information relevant to the profession and to build their knowledge and skills to enable them to deliver patient healthcare services safely and effectively.

Over 86% of respondents to the conference evaluation survey rated the overall quality of the conference as either "excellent" or "very good."

Expert speakers presented on a range of topics, including:

- *The future of integrated health: The UK experience.* Ravi Sharma, Director for England, Royal Pharmaceutical Society.
- *Interprofessional practice, behavioural change and professional standards.* Professor Debra Rowett, University South Australia.
- *Pharmacist Services and Primary Health.* Di Vicary & Elaine Roberts, Hawkes Bay DHB
- *Medicinal Cannabis.* Chris James, Medsafe and Elizabeth Plant, Equis
- *Mental health and addictions.* Maria Baker, Te Rau Ora
- *Safety in Practice.* Diana Phone and Angela Lambie, Waitematā and Auckland DHBs
- *Childhood Communicable Diseases.* Georgina Tucker, Waitematā and Auckland DHBs
- *Health System Improvement and Innovation with Pharmacy.* Keriana Brooking, Deputy Director General, Ministry of Health
- *Primary health care pharmacy: Evolving roles in New Zealand.* Dr Caroline Morris, Dr Janet McDonald, Dr Tara Officer
- *Digital services and technology for health.* Shayne Hunter, Deputy Director General, Ministry of Health
- *Point of Care Testing models.* Elizabeth Plant.

- *Current Hot Topics in Practice.* Chris Jay & Chloe Campbell, Pharmaceutical Society of New Zealand.
- *Access and Equity.* Alison Hill, PHARMAC
- *Pharmacists attitudes towards people living with HIV.* Dr Charon Lessing
- *Adult Communicable Diseases.* Dr Helen Petousis-Harris.

Clinical case studies in primary health were presented by the Clinical Advisory Pharmacists' Association (CAPA):

- *Switching antidepressants: the individual, the medicines and the context.* Keith Crump
- *Chronic pain.* Pauline McQuoid
- *Myth busters (questioning those 'old wives tales' about medicines).* Dr Linda Bryant, Penny Clark, Carolyn Woolerton and Helen Cant

Innovative new pharmacy services were presented by four Shark Tank finalists:

- *Using glucose monitoring technology.* Helen Cant
- EPIC (Early Pharmacist Intervention and Care) *Middlemore Hospital.* Catherine Wong & Helen Lo
- *Lifestyle as Medicine.* Hannah O'Malley
- *Community Flu Fighters.* Vicky Chan, Vanessa Shao & Lilian Shih



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# Annual Stakeholder Function

The Society gathered with key health sector stakeholders at our annual stakeholder function on 4 September 2019 at the Wellesley Boutique Hotel, Wellington. This was a chance for the Society to promote the vital role of pharmacists within the healthcare workforce.

## Strong health sector attendance

The Ministry of Health's Director General of Health and Chief Executive, Dr Ashley Bloomfield, attended the function and talked to invited guests.

Invited guests included representatives from:

- › Ministry of Health
- › District Health Boards
- › Technical Advisory Services
- › Royal New Zealand College of General Practitioners
- › New Zealand Medical Association
- › Allied Health Aotearoa
- › Medicines New Zealand
- › Pharmac
- › Health Promotion Agency
- › Stroke Foundation

- › Plunket
- › Open Polytechnic
- › Otago School of Pharmacy
- › GlaxoSmithKline
- › Novartis
- › Pharmacy Guild
- › Pharmacy Council
- › New Zealand Hospital Pharmacists' Association
- › Clinical Advisory Pharmacists' Association
- › New Zealand Pharmacy Education and Research Foundation
- › Pharmacy Defence Association

## Ian McMichael

President of the Society, Ian McMichael's speech highlighted the Society's goals to ensure the pharmacy profession has the capability and skills to work at the top of their scope of practice, in order to fix pressing and significant health needs in the community.

**TOP LEFT:** Ian McMichael (President of Society)

**LEFT:** Dr Ashley Bloomfield (Director General, Ministry of Health) talking to Richard Townley (Society Chief Executive)

In particular, the President highlighted the Society's goal for pharmacists to be funded to provide all vaccinations on the immunisation schedule and for the profession to continue to innovate and develop and deliver new services. The President also highlighted mental health and addiction as an area where pharmacists' skills could be better utilised.

## Lynette Stewart

Attendees at the function were also privileged to hear guest speaker Lynette Stewart, Chief Executive of Ki A Ora Ngātiwai talk about her mahi (work) in Māori health.

Lynette's long service and commitment to the health sector was recognised in 2006 with the Companion of New Zealand Order of Merit in the Queen's Birthday Honours.

Ki A Ora Ngātiwai is an iwi health provider delivering mobile service for the people within Ngātiwai Rohe, in partnership with the Te Tai Tokerau PHO (Northland).

One theme that shone through Lynette's speech was her passion for addressing current inequities in healthcare, the worst of which are experienced by Māori.

**BELOW:** Lynette Stewart (Guest Speaker)



## Dr Stewart Jessamine

At the function, a posthumous honorary membership of the Society was awarded to Dr Stewart Jessamine. The award was accepted on Stewart's behalf by his wife and daughter.

Honorary Membership is awarded to individuals who are not pharmacists, and who have rendered "distinguished service to the Society or to pharmacy in New Zealand".

Under Dr Jessamine's watch, New Zealand became renowned as a world leader in improving public access to medicines through pharmacists. His passing in February 2019 was a huge loss for the pharmacy profession.

# Member Survey

Thank you to all those members who took the time to provide us with feedback by completing the Member Survey 2019.

The survey was launched on 11 November 2019 and ran until 30 November 2019. A total of 513 members participated in the 2019 survey, compared with 443 members in 2018.

## Overall experience

- 71% of members rated their overall experience and interaction with the Society as either good, very good or excellent.

## Suggestions for improvement to member experience

- Increase advocacy and promotion for pharmacy profession.
- College education and training courses are perceived as good quality, but expensive.
- ENHANCE professional development programme could be more user friendly/less complicated.
- Branch meetings to be delivered via webcast/video streaming (eg. Zoom).
- Website could be easier to navigate/search.
- Hospital pharmacists wanting more education/training opportunities.
- Staff are helpful, informative, prompt in responding.

## Top 5 issues facing pharmacy profession

- Support from government to enable pharmacy services to be provided.
- Funding from DHBs for pharmacy services.
- Public awareness of the vital role of pharmacy in the healthcare system.
- Collaboration with other healthcare professionals to enable pharmacy workforce to be better utilised.
- Integration of pharmacy services with general practice.

## Suggestions for improvement in meeting our strategic goals

- Promote the role of the pharmacist as the medicines expert in the healthcare team. Promote pharmacists as trusted health professionals.
- Collaborate with general practitioner (GP) professional body, so they understand and endorse the work pharmacists are doing to their GP workforce.





- Advocate more for community pharmacy services (e.g. extending Community Pharmacy Anticoagulation Management Service (CPAMS) and Medicines Use Review (MUR).
- Society public relations campaign needed to address competition in the marketplace.

### Understanding of services

- 40% of members felt they had a low understanding of the Society's role in advocacy and representation for the pharmacy profession.

### Service delivery

- 78% of members feel the ENHANCE professional development programme is either meeting or exceeding expectations.
- 73% of members feel that advocacy and representation for the pharmacy profession is meeting expectations.

### Learning format for College courses

- On demand (online) courses were the preferred learning format for the majority (67%) of members.

### Communications

- 66% of members agree or strongly agree that the number of communications sent by the Society is appropriate.
- 56% of members agree or strongly agree that the Society responds to their enquiries or requests in a timely manner.

### Promotion of pharmacy to the public

- 94% of respondents would support the Society developing further public relations campaigns promoting pharmacy to the public.

### Branch meetings

- 78% of respondents wanted clinical continuing education and 58% wanted guest speakers from the health sector from their branch meetings.

### Suggested pharmacy services to develop

- Repeat prescribing/widening pharmacist prescribing
- Minor ailments
- Range of vaccinations
- Point of care testing
- Minor wound care
- General practice pharmacy
- Medicines Use Review (MUR)
- Health checks – Blood pressure, glucose, cholesterol etc.
- Sexually Transmitted Infections (STI) testing/prevention
- Contraceptive advice
- Use of pharmacists in hospitals/rest homes
- Asthma management
- Eczema management
- Anticoagulation services (e.g. CPAMS)
- Diabetes education and testing
- Long term condition management
- Mental health services
- Vitamin B12 injections
- Gout management

# Our international pharmacy networks

Through annual meetings and regular dialogue with international pharmacy leaders, the Society keeps abreast of best practices and ensures that New Zealand members are offered world class education, training and continuing professional development.

We also ensure that New Zealand's innovative thinking is endorsed and supported by the International Pharmaceutical Federation (FIP) World Council in our drive to grow and expand the pharmacy profession. The Society is a member of FIP, with voting privileges, and can put up policy paper proposals for FIP adoption and international advocacy.

The International Pharmaceutical Federation (FIP) is a non-governmental organisation that works to support the development of the pharmacy profession, through practice and emerging scientific innovations, and through developing the pharmacy workforce in order to meet the world's health care needs and expectations. It is the global body representing pharmacy, pharmaceutical sciences and pharmaceutical education. Through their 151 national organisations, academic institutional members and individual members, they represent over four million pharmacists, pharmaceutical scientists and pharmaceutical educators around the world.

The Society benefits from membership of FIP by being able to access information from a number of countries on a diverse range of topics including deregulation of ownership, models of care, pharmacist remuneration and integration with general practice.

Ian McMichael, the Pharmaceutical Society of New Zealand's president, was at the launch of the FIP Global Vaccination Advocacy Toolkit at the FIP World Congress in Abu Dhabi in September 2019. The toolkit includes a case study from the Pharmaceutical Society of New Zealand on their advocacy strategy for achieving vaccination authority. The case studies in the toolkit provide a set of best advocacy practices around vaccination for all FIP member organisations across the globe.

Meetings and workshops enable the Society to talk directly to New Zealand's accrediting agency, the Australian Pharmacy Council, the Royal Pharmaceutical Society and National Health Service (NHS) leaders, European leaders of countries of similar population size and with varying health and pharmacy systems.

## Global Quality Assurance of Continuing Education

One of the FIP's objectives is to produce a global framework of best practice continuing education (CE) and continuing professional development (CPD). To do this, two FIP working groups have been established, each with a project to enable and promote transparency and comparability within the professional education environment. The ultimate objective of the working groups is to develop a global framework for quality assurance of CE and CPD activities in pharmacy.

- 1. Model Approaches of Mutual Recognition** – to explore the options for mutual recognition of accreditation in CE/CPD, and create a guidance document to facilitate the second project
- 2. Quality in Continuing Education** – the development and implementation of a practical peer reviewed and quality assured accreditation framework for CE/CPD.

Liz Johnstone is the Pharmaceutical Society of New Zealand's representative on this forum and has the responsibility for the final writing of the framework. This will undergo a final international peer review and Liz, together with Mike Rouse (Director, International Services, Accreditation Council for Pharmacy Education, USA), will present this at a 90-minute workshop at the Lifelong Learning in Pharmacy Conference in Dublin in July 2020.

# Corporate and Member Services

ALASDAIR MCINTOSH



The Corporate and Member Services team provides the core infrastructure to allow the Society to carry out its primary functions in pursuit of its strategic objectives.

The team provides services across key business areas including:

- administration and membership
- secretariat services for other pharmacy organisations
- communications and marketing
- finance
- information technology services
- learning management system support for other business units.

In 2019 we further consolidated and improved on business functions with positive benefits across the Society. Previous years investments, in information technology services and implementation of new phone systems, have allowed rescoping of workflows and efficiencies in processing wherever possible.

Some highlights across the team functions for 2019 include:

- fully online processing of membership renewals
- higher numbers of renewals happening more quickly than in previous years
- faster response times to member queries and prompt resolution to issues
- organisation and running of the Society's Conference 2019 in Auckland
- organisation and running of the Annual Stakeholder Function in Wellington
- new finance team in place
- consolidation of MYOB finance system across all entities
- improved financial reporting for both management and National Executive
- more streamlined and better financial processing across all entities
- member communications more targeted
- further development of the weekly Newsroom
- regular media releases in response to topical issues

- greater communications support across business units
- further refinement of the website
- support for Pharmacy Defence Association (PDA) in implementation of new website and membership database
- new and improved processing of PDA membership renewals
- continued support and management for New Zealand Hospital Pharmacists' Association (NZHPA) in all administration areas
- Implementation of new computers across the business
- promotion of Zoom for video conferencing
- providing ongoing support for College courses and programmes via the learning portal
- providing support for members and their queries related to learning course and programmes.

The Corporate and Member Services team continues to provide a high level of service to Society members, internal business units and the external organisations we partner with.



# SELF CARE

## *Patient Information*

Pharmacy Self Care was introduced in New Zealand in 1992. Since its introduction, the programme has expanded to include online learning modules for education of pharmacists as well as pharmacy technicians and assistants.

Primarily, Pharmacy Self Care is a health information and education programme for the public designed specifically for delivery through pharmacies. It aims to highlight the role of pharmacists in primary health care, particularly in the area of quality use of medicines.

The programme also recognises the importance of all pharmacy staff working together as a team to promote the pharmacy as a centre for health information.

### **Pharmacy Self Care goals**

- To use pharmacy's unique position to improve community access to quality health information, increase consumers' health awareness and encourage active involvement in their own health care.
- To provide topical and applied continuing education options to all pharmacy staff.
- To provide pharmacies with the opportunity to be recognised as primary centres for health information and advice.

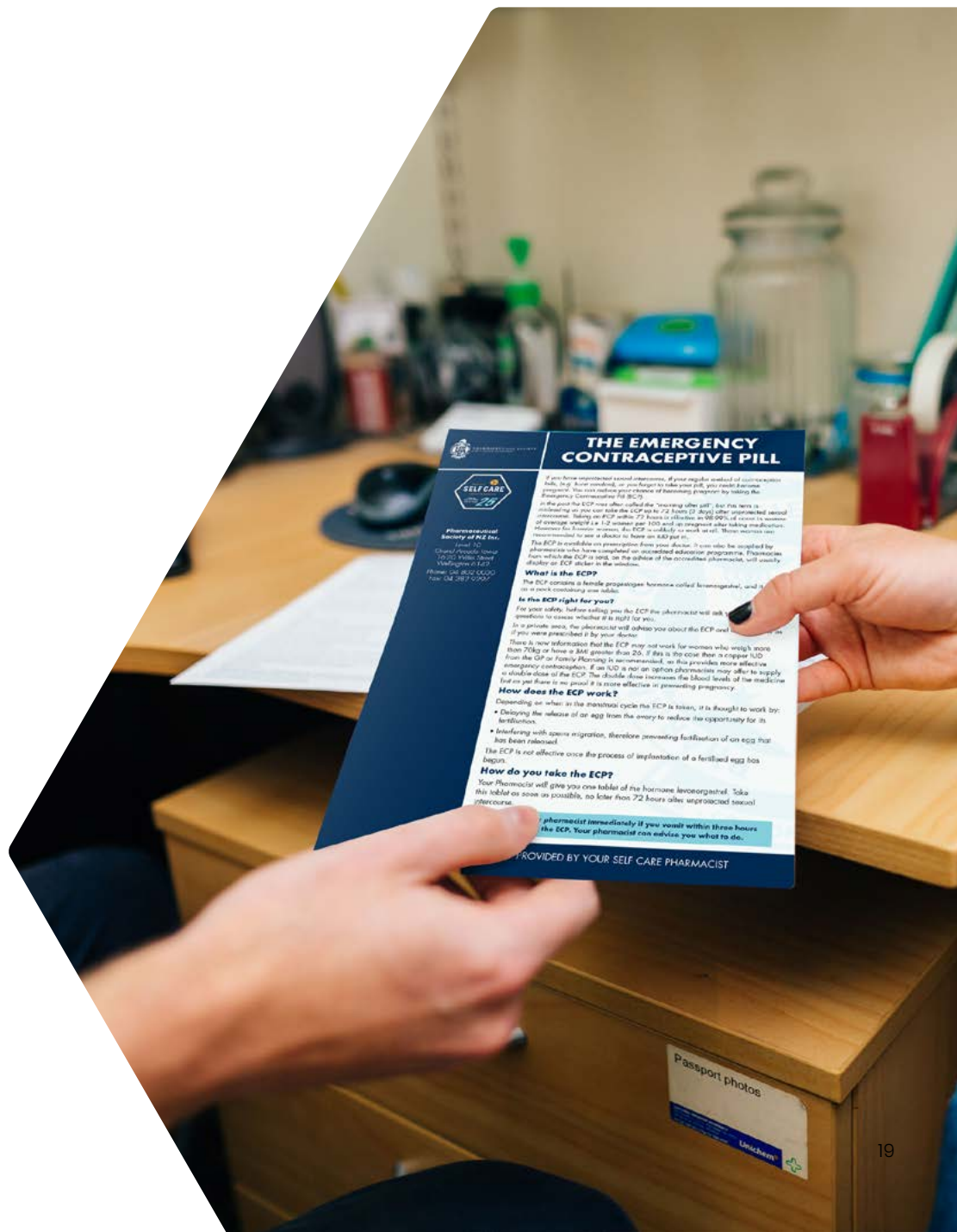
In 2019 all Pharmacy Self Care fact cards were reviewed and updated to ensure consistency of format and to update content where required. A dedicated Pharmacy Self Care website has been developed and will launch in 2020. A fully online ordering portal was launched mid-year and has proven to be very effective.

We continue to review the models under which Pharmacy Self Care is available to pharmacies with the intention to offer a more diverse range of models incorporating both online and print options.



## Pharmacy Self Care Fact Card Titles

- |  |                            |
|--|----------------------------|
| Acne   | Head Lice                  |
| Alcohol and Pregnancy                        | High Blood Pressure        |
| Anxiety                                      | Indigestion and Heartburn  |
| Arthritis                                    | Influenza                  |
| Asthma                                       | Maternity Services         |
| Children's Illnesses                         | Migraine                   |
| Children's Pain and Fever                    | Mouth Ulcers               |
| Chronic Back Pain and Ankylosing Spondylitis | Pain Relief                |
| Cold Sores and Herpes Simplex                | Preparing for Pregnancy    |
| Constipation                                 | Prostate Problems          |
| COPD   | Quit Smoking               |
| Coughs and Colds                             | Reducing Your Cholesterol  |
| CPAMS  | Safe Use of Medicines      |
| Depression                                   | Scabies                    |
| Diarrhoea and Vomiting                       | Sleeping Well              |
| Emergency Contraceptive Pill                 | Sprains and Strains        |
| Eye Care and Conjunctivitis                  | Sun Safety and Skin cancer |
| Fighting Colds and Flu                       | Threadworms                |
| Fungal Infections                            | Type 2 Diabetes            |
| Gout   | Urinary Tract Infections   |
| Haemorrhoids                                 | Vaginal Thrush             |
| Hay Fever                                    | Warfarin Management        |
|  | Weight and Health          |





# PRACTICE

*Pharmacist Support*

The Society undertake advocacy work representing pharmacists in all areas of practice. Many written submissions are made on specific issues to organisations such as the Ministry of Health, PHARMAC, Medsafe, Medicines Classification Committee, Central Region Technical Advisory Service (TAS) and Parliamentary Select Committees.

Both formal and informal meetings also occur with government agencies, various organisations and individuals from a variety of health professions. We endeavour to present the perspective of the pharmacy profession and highlight the opportunities pharmacists may provide in contributing to the health care of New Zealanders.

The Society undertook regular engagement and provided feedback to Ministry of Health officials and others on the development of the Therapeutic Products Bill and World Antibiotic Awareness Week.

The practice support team worked with the implementation team at PHARMAC to provide support for pharmacists working in general practice through a combined symposium designed to connect, network, support and educate all pharmacists working in this environment.

The team have been involved in an update of the standard batch sheets for oral liquid formulations compounded in New Zealand or New Zealand standard oral formulations (NZSOF) which are hosted on the Society's website.

The Society's practice support team in partnership with the Pharmacy Guild and Green Cross Health continued their collaborative work to support pharmacists and promote continuous quality improvement in areas identified for attention by the new Medicines Control risk-based audit framework.

The team have provided valued contributions to the Ministry of Health Medicines Management Digital Oversight Group, the National Influenza Strategy Group, the Ministry of Health Immunisation Team and the Health and Disability Services Standards review.

CHRIS JAY



The team have continued to work collaboratively with other pharmacy organisations including New Zealand Hospital Pharmacists Association (NZHPA), Pharmacy Council, Pharmaceutical Society of Australia and the Pharmacy Guild of Australia.

The Society provided feedback on the proposal to widen access to pertussis vaccine, widen the access to meningococcal ACWY vaccine, various DHB community pharmacy strategy documents, and applied to the Medicines Classification Committee for the re-classification of influenza vaccine for registered intern pharmacists.

The Society also responded to the New Zealand Health and Disability System review, the New Zealand Medicinal Cannabis scheme and Therapeutics Products Bill consultations.

The practice support team have continued to answer practice related questions from members, and to develop and update the Pharmacy Practice Handbook and related Practice Guidelines available on the Society's website. The team understand this is an important tool for its members and has refined a product that is useful, easy to navigate and can be used on a variety of electronic platforms.



# RESOURCES

*Information Services*

The Society supports its members by making available a range of online references, databases and international journals allowing access to relevant, up to date research and reference material.

## **Electronic Reference Resources**

Subscriptions to EBSCOhost and MedicinesComplete provide members with access to a variety of electronic information resources via the Society website.

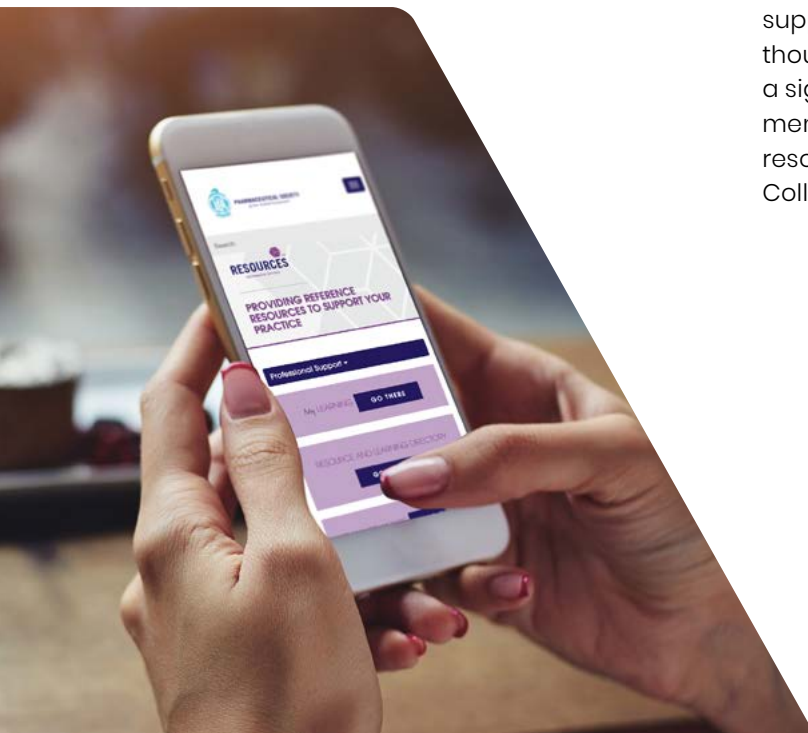
## **EBSCOhost**

Our EBSCOhost subscription gives members access to a suite of databases encompassing an extensive range of electronic journals and other resources. MEDLINE Complete and CINAHL Complete provide access to more than 3,000 full text journals while DynaMed, an evidence-based clinical reference tool which is updated daily, supplies point-of-care clinical summaries for thousands of topics. Dynamed underwent a significant upgrade during 2019 and now members have access to a wider range of resources via this portal. The Clinical e-Book Collection numbers over 1,700 titles.

## **MedicinesComplete**

Our MedicinesComplete subscription gives members full text electronic access to key Pharmaceutical Press titles Martindale, Herbal Medicines, Stockley's Drug Interactions and Stockley's Herbal Medicines Interactions. The first three of these titles are among those references recommended for pharmacy audit compliance.

The Society continues to work with these providers to bring the latest technology and associated benefits to these resources. Improvements and greater interactivity across a range of mobile devices will be available soon to support access to these resources.



DEBBIE WALLACE



The Society's EVOLVE Intern Training Programme is the accredited intern programme based on the Pharmacy Council of New Zealand (the Pharmacy Council) Competence Standards for pharmacists.

The EVOLVE programme enables intern pharmacists to strengthen application of their knowledge and skills and prepares them for clinical practice. The programme enables them to develop competence, self-responsibility and awareness of their practice in the healthcare team. Successful completion of the EVOLVE programme provides the opportunity to sit the Pharmacy Council's summative registration exam.

Intern pharmacists are registered practitioners as defined in the Health Practitioners Competence Assurance Act 2003 and are clinically responsible for their own actions while practising under supervision of a preceptor pharmacist.

As well as delivering training and support for intern pharmacists, the accredited EVOLVE intern programme supports preceptors and employers to provide quality workplace-based training.

### Enrolments

As at 1 February 2019 there were a total of 212 interns enrolled in the EVOLVE Intern Training Programme.

This included 201 New Zealand Bachelor of Pharmacy graduates, one Australian Bachelor of Pharmacy graduate and six overseas registered pharmacists. There were also five completing the six-month programme; one pharmacist who was returning to practice and four overseas registered pharmacists.

As of 2020 the six-month programme will no longer be offered, notice of this change was given in 2018.

### Programme

The EVOLVE programme was delivered to the interns via a mix of online learning and face to face training covering a broad curriculum which is relevant to the intern learning year.

In addition, EVOLVE:

- delivered several preceptor training workshops
- gave presentations to both Otago and Auckland University fourth year pharmacy students
- ran a clinical mentoring programme for those from the previous year who had not yet registered in the pharmacist scope of practice
- offered English tutoring co-ordination and support for those who were struggling to meet the English language requirements of the Pharmacy Council.



## Vaccination Training

In August 2019 we ran a pilot immunisation training for 20 intern pharmacists. Collaboration with the Immunisation Advisory Centre (IMAC) enabled us to set up this pilot which was delivered both online and face to face.

The pilot was so successful that as of 2020 all intern pharmacists will undergo vaccinator training. Having intern pharmacists trained as vaccinators will enable improved access to vaccination for members of the public.

We acknowledge the important role that IMAC's Loretta Roberts and Bernadette Heaphy had in making this happen.



**ABOVE:** Immunisation training pilot workshop, August 2019



# ENHANCE

*Professional Development*

The ENHANCE team has continued to reflect on possible programme development and how we can better facilitate the process for pharmacists to meet their recertification requirements. Our aim is always to remove barriers to individual participation while delivering the Pharmacy Council framework requirements.

The 2019 year was one of consolidation, as we were aware that the Pharmacy Council are reviewing the recertification framework. We have continued with business as usual but have not made any major changes to the ENHANCE website or the programme content.

## **ENHANCE User Survey**

A user survey, focussing on Group 2 assessment, group 3 and the performance of the ENHANCE team was sent to all pharmacists enrolled in ENHANCE, with 11.5% of the Practising Register responding.

It was encouraging to find that over 90% are mostly or completely confident documenting group 1 and 2. Generally about 10% didn't have a problem with group 3, with 45-50% finding it straightforward and 40-45% finding it okay.

About half of the respondents had contacted ENHANCE in the last year and of those, 90% thought we were excellent or good in our promptness in replying, and in answering questions/solving the problem and 85% thought we were excellent or good in providing constructive individualised support.

## **Individual pharmacist support**

We continue to peer review pharmacists for the quality of their ENHANCE records documentation as part of our quality assurance requirements. This year, although pharmacists were still selected randomly, we targeted those who were either in the second or third year of their learning period. Our intention was to focus our support on those who were coming to the end of their learning period, and we reviewed 8% of this group.

ELIZABETH JOHNSTONE



We also reviewed several pharmacist's records at their request.

Several pharmacists did not meet their overall three-year learning period requirements before recertification at the end of March. All of these were referred back to the ENHANCE team by the Pharmacy Council and we worked with them individually to help them complete their outstanding obligations.

After the Pharmacy Council quality audit is complete, any pharmacist who they have determined needs more help with their professional development is referred back to us for in depth individual support.

All pharmacists new to the Practising Register are contacted and ENHANCE requirements explained at the time of their entry onto the Practising Register. We follow this with three reminders over the next 4 months.

This is followed up by the provision of the ENHANCE pack containing the Guide to ENHANCE (updated annually), the Introduction to and process for the Practice Review, the Quick Guide to the ENHANCE website, Group 3 – dates for peer meetings and completing each step and the document 'Making sure your Learning Resources are reliable'.

We used the Society's Friday Newsroom email to remind pharmacists about their annual and three yearly requirements early, so they had time to complete everything before recertification.

The ENHANCE team attended the Society's conference in Auckland in June and were available for both days to answer questions and provide advice.

## Interns

All interns use the ENHANCE website to record their continuing education (CE) during their intern year (a minimum of 20 points over and above their registration requirements between February and October), as a prerequisite for attending the Assessment Centre. This ensures that they are familiar with documenting group 1 and 2 learning right from the start of their careers and enables a seamless transition into ENHANCE when they register in the Pharmacist Scope of Practice.

## ENHANCE and Society websites

Information and resources both on the ENHANCE and Society (ENHANCE pages) websites are regularly reviewed and updated, according to a set review schedule to ensure ongoing currency of information.

### ENHANCE website

There have been some background upgrades to the ENHANCE website during 2019 that have significantly decreased the time needed for several administrative functions. The two visible changes have been to the way the group 1 and 2 items display in the Group 23 Action step (they now display in date order rather than a random assortment of dates) and there was a minor change to the declaration as requested by the Pharmacy Council.

### ENHANCE pages of Society website

Additional learning resources for Symposia topics were provided on the Learning Resources page. New templates were developed to allow allocation of group 2 points for presentation to peers, peer group discussion and reflective writing.

New specific learning resources have been created for Medicinal Cannabinoids and Antibiotic Resistance. Extended learning resources were developed for topics covered in the Society's 2019 conference.

## Continuing education accreditation

Although a pharmacist's continuing education choices are not required to be formally accredited, many education providers and pharmacists prefer this option as it provides an assurance to pharmacists and other stakeholders that an activity has been reviewed for its educational quality and for its relevance to professional pharmacy practice.

The Society has an internationally peer reviewed set of accreditation standards that we use to accredit a wide range of learning activities and programmes.

All Society College courses and programmes meet these accreditation standards, and in addition, we annually accredit several externally provided activities.

The accreditation standards were first developed in January 2015 (version 1) and they were reviewed and benchmarked against other international accreditation standards during 2019. Version 2 was published in July 2019. These represent the best of currently accepted international accreditation practice.

SHIRENA VASAN



College Education and Training (College) continues to provide training that meets the needs of pharmacy including those which lead to new roles and services.

### Community Pharmacy Gout Management Service

College worked with Counties Manukau District Health Board (DHB) and specialists to develop the Community Pharmacy Gout Management Service. This service has now been rolled out in Capital & Coast DHB. Feedback so far is that 100% of pharmacists who completed the training said their learning needs were entirely met.

### CollegeCast

College launched another podcast season (CollegeCast) interviewing Keriana Brooking, Deputy Director-General of Health, Health System Improvement and Innovation; Ravi Sharma, Director of England, Royal Pharmaceutical Society; and Helen Cant, pharmacist prescriber in primary care.

### Midwife training

College presented at two midwife training sessions in Wellington (approximately 50 midwives in total) in 2019 with positive feedback. This involved discussing prescription writing requirements. Both groups were very engaged, and feedback was that it was a good refresher.

### Branch presentations

College were asked to present at Society branch meetings – Nelson, Blenheim and Auckland. These evenings were focused on Medicine Use Review (MUR) and/or Pharmacy Accuracy Checking Technicians (PACT).

### Medicine Use Review videos

College interviewed patients, pharmacists, nurses and a GP as part of the development of the MUR videos in 2019. These videos were well received and are continuing to be promoted.

### Pharmacy Accuracy Checking Technicians (PACT) training programme

College provides training and support to the PACT trainees and preceptors throughout their time in the PACT training programme. College continues to maintain the PACT 'register' and monitor recertification. In 2019, 31 technicians enrolled into the PACT training programme.

*PACT feedback:*

**“The learning modules were very thorough, and it was a good refresher for legislation. My work colleagues also benefited from the course as it created team discussions and review of checking procedures.”**

## 2019 programmes

College delivered three Programmes in 2019. There was positive feedback on the two new programmes for 2019 – Managing Medicines in Older People and Chronic Pain Management. The Biologics Programme was also run again from 2018. See details of enrolment numbers below.

### Managing Medicines in Older People

This programme had 63 enrolments, with 84% of respondents rating their satisfaction with the programme as 8 or above (with 1 being poor and 10 being excellent)

*Member feedback:*

**“I actually think you have ‘nailed’ it with a very interactive but challenging learning programme.”**

**“I found many aspects in the course which was very relevant to my practice.”**

### Chronic Pain Management

This programme had 33 enrolments, with 96% of respondents rating this programme as 8 or above (with 1 being poor and 10 being excellent).

*Member feedback:*

**“The whole programme exceeded my expectations; and was very valuable in my day to day practice of pharmacy...”**

**“..I thought I knew quite a bit about chronic pain management, but the medication review in the last lecture regarding specific pain disorders was exceptional.”**

### A Changed Treatment Landscape? Current use of Biologics in Rheumatology

This programme was re-run from 2018, with 11 enrolments, and 88% of respondents rating this programme as 8 or above (with 1 being poor and 10 being excellent).

*Member feedback*

**“Very thorough programme.”**

**“I appreciated being updated on how Biologics are changing treatment in more than one practice area.”**

## Accreditation courses

Community Pharmacy Anticoagulation Management Service (CPAMS).

- 105 pharmacists enrolled in the CPAMS training in 2019.

CPAMS Recertification.

- 120 pharmacists enrolled in the recertification course in 2019.

Medicine Use Review Service (MUR).

- 47 pharmacists enrolled in the MUR training programme in 2019.

## Other accreditation courses

Pharmacists can complete accredited training to assess the appropriateness of supplying and advising on specific medication.

- 211 pharmacists enrolled in the Emergency Contraceptive Pill training.
- 264 pharmacists enrolled in the Trimethoprim training (including live update).
- 286 pharmacists enrolled into the Selected Oral Contraceptive reclassification course.
- 823 pharmacists enrolled into the Clozapine Dispensing in Community Pharmacy course.

## Short courses

### Insomnia & Sleep (Melatonin Reclassification) Short Course

This course was launched in 2019. Although this was not compulsory for pharmacists to complete, there has been a pleasing number of enrolments and positive feedback on this course. Out of those who have completed the course, 90% said their learning needs were entirely met. There were 434 enrolments for this course in 2019.

Member feedback:

**“PSNZ training on sleep: whole course was excellent”**

**“Sleep presentation was great, and how we find out how to decipher the questionnaire”**

We had 300 enrolments for live webinars in 2019. Topic titles included:

- Improving Māori Health Outcomes
- A Focus on Antimicrobial Stewardship and Resistance
- Atrial Fibrillation
- Basic Principles of Islamic Culture
- Combination Prevention of HIV
- Diabetes Management across Time Zones
- Diabetes Management in Pregnancy
- Interpreting Laboratory Results
- Oral Formulations

- Sex, Drugs and Synapses: Management of Sexual Dysfunction with Psychiatric Drugs
- Vaccine Preventable Diseases and Vaccines update.

We also updated the Trimethoprim course and launched this as a live webinar. This was included in the Trimethoprim numbers above.

We had a further 228 enrolments of other on demand short courses.

## Free courses

We continued to provide selected free courses in 2019:

- 1697 enrolled in the MAVIRET Quality Use of Medicines course
- 158 enrolled in the Paediatric Asthma course
- 408 enrolled in Adalimumab (Humira) in General Practice and Pharmacy
- 292 enrolled in Substance Impaired Driving
- Clozapine Dispensing in Community Pharmacy was also provided free to members (numbers mentioned above).

## Workbooks

We had a total of 83 purchases of the workbooks in 2019. Topic titles:

- Improving Dispensing Accuracy and Self-Checking Process workbook
- Heart Health Workbook
- Common Musculoskeletal Disorders Basic Practice Update Workbook
- Palliative Care Basic Practice Update Workbook.

## Other

- 3 people enrolled for the Medicines Therapy Assessment (MTA) portfolio.
- 14 people enrolled in one of the Revisit the Workplace courses.



# Branch Activities

## Keeping the profession strong

Kia mau tonu te ihi  
o ngā kaitiaki rongōā



## Northland

2019 was a busy year, with most time and resource invested in promoting and supporting measles, mumps and rubella (MMR) vaccination implementation in Northland.

I have continued my role in Northland, as a communication link, on behalf of the Society. But I am hoping that sometime in the future we can identify someone who is available to properly fill this role.

I have supported Business Continuation Planning/Emergency Planning within Northland, in conjunction with the Northland DHB and the Ministry of Health.

I have also been involved with workforce development, with a focus on Māori workforce development in Northland, where this is very under-represented.

I continue as a member of the Northland Community Pharmacist Service Development Group, which is primarily a Northland DHB community pharmacy liaison group, supporting Northland community pharmacists and developing new community pharmacy services.

I have continued to administer the “Northland Pharmacists – Pharmaceutical Society Peer Support” Facebook page. This has been relatively quiet (half a dozen pharmacists post regularly) but is still an excellent way to connect with our peers, to share information and provide help where able.

### **Shane Heswall**

BRANCH PRESIDENT



## Auckland

It was another busy year in 2019 for the Auckland branch, with committee member changes and a line-up of continuing education (CE) sessions that was very well received by members.

*"The branch has done really well.  
Carry on the good work!"*

(STEVEN TONG, PHARMACIST, UNICHEM MAINSTREET PHARMACY)

Led by Peter Yoo (branch president), we have maintained the support for our members and paid special focus to our early career pharmacists, intern pharmacists and pharmacy students.

Throughout the year, we have organised the following CE sessions, with an emphasis on having a networking session before each presentation. A huge thanks to the University of Auckland Pharmacy School, for providing us with the venue for such events.

1. March 2019 – ‘Managing metabolic adverse effects: metformin use in schizophrenia’ by Ms Ariel Hubbert followed by an ‘Introduction’ from Society President Ian McMichael.
2. May 2019 – ‘Immunisation and how pharmacists can best help to support the immunisation schedule’, led by Ms Georgina Tucker and ‘Cough and cold medicines reclassification’ by Dr Natalie Gauld.
3. July 2019 – ‘Clearhead is a one-stop-shop online platform for mental health and wellbeing’ by Ms Angela Lim and ‘Having conversations – how to talk to your patients about mental health’ by Mr Keith Crump.
4. September 2019 – ‘Medicinal cannabis’ led by Dr Graham Gullbransen and Ms Sanya Ram.
5. October 2019 – Pharmacy Accuracy Checking Technicians (PACT) information evening led by Ann Privett.

In line with our 2019 focus on our early career pharmacists, intern pharmacists and pharmacy students we subsidised the registrations of 20 early career pharmacists from Auckland to attend the Society’s conference ‘Towards Integrated Health’ in August 2019. We also sent three pharmacists to the Australian Pharmaceutical Society’s conference held in Sydney in July.

As usual, we have held several events for intern pharmacists in the Auckland region, including a ‘Meet and Greet’ and ‘Assessment Centre Preparation Workshop.’ I would like to take this opportunity to say a huge thank you to all the pharmacies and pharmacists involved with the workshop. I am certain the interns are grateful for your time hosting such a practical evening prior to the ‘Assessment Centre’.

In December we saw Branch President Peter Yoo step-down and the vice president, myself, become the new president for the branch. With this change came a new vice president, Michael Hammond, and a new branch secretary, Jemma Fielding.

I am grateful to be working with such an amazing team of volunteers at the Auckland branch. Their passion and dedication to represent the profession is second to none.

With your continued support, we look forward to building upon the momentum from 2019 and delivering more exciting and valuable events in 2020. We will also endeavour to grow our representation for the Auckland region and to be the voice for you.

**Crystal Hayr**

BRANCH PRESIDENT





## Waikato– Bay of Plenty

The education activities of the Waikato-Bay of Plenty branch continue to be centred on the two largest centres, Hamilton, through financial support of the sessions run by the Waikato Community Pharmacy Group, and in Tauranga, with independent education sessions.

Tauranga sessions covered the topics:

- Prescribing cascade Adverse Drug Events (ADEs)
- Macular degeneration
- Mental health.

The branch also sponsored an early career pharmacist from one of our rural towns to attend the Pharmaceutical Society of Australia's conference in Sydney.

Our Annual General Meeting (AGM) was held on 3 April 2019 in Tauranga, in conjunction with an education evening on prescribing cascade Adverse Drug Events (ADEs).

At the AGM Pauline McQuoid stepped down as branch president. I accepted the nomination to take on the role and was selected unopposed.

The remaining committee members - Daphne Earles, community pharmacist from Tauranga; Ben van den Borst, Bay of Plenty Community Pharmacy Group Liaison and community pharmacist from Tauranga; and Sanjay Joshi, community pharmacist from Waikato - agreed to continue to serve the branch.

Providing local education opportunities for members who are not within reach of these centres remains a challenge for the branch committee. I invite members with an interest in meeting this challenge to put themselves forward for the branch committee.

### **Karen Street**

BRANCH PRESIDENT



# Taranaki

Congratulations to our 2019 interns on their success. It's an incredible achievement becoming a pharmacist, and we look forward to seeing what the future of pharmacy holds for you.

Thank you to all our members for their engagement and input over the year. It has been greatly appreciated and means the effort and hard work that goes into planning the branch activities is a worthwhile process.

We had several successful branch events throughout the year:

## Paediatric Eczema – Karen Georgeson

We were lucky enough to have Karen run us through an interactive workshop on eczema in children with great engagement from those who attended. It was a good opportunity to reflect on our current practice and review some of the communication strategies we use in our day-to-day practice in order to help families manage their children's eczema better.

## Immunisation – Trish Wells Morris

This was a great opportunity to learn about the emerging role of pharmacists in providing immunisation to the community. With the latest measles outbreak, it is more important than ever that pharmacists play a key role in educating and providing timely advice to the public, as well as delivering vaccines to the community.

## Intern Support Group

This was our first year establishing a support group for interns in the Taranaki region. Work scenarios from different pharmacies were used to help our interns build up their confidence in becoming pharmacists. A huge thanks to everyone who made this an invaluable experience for our interns. We now welcome our interns for 2020 and cannot wait to meet you all soon.

## First Aid – Claire Barnfather

Another successful year of first aid re-certification. A huge thank you to Claire for getting this together, and to our members who support the running of this course.

As always, a big thank you to our branch committee for their work during the year.

## Qui Reitzig

BRANCH PRESIDENT



# Hawke's Bay

The major focus for the Hawke's Bay branch is supporting the upskilling of our pharmacist workforce. To this end we have a vibrant continuing education programme.

At the first session of the year we honoured our retiring pharmacists with a presentation, and gifts. We have collectively lost over 200 years of experience.

## Continuing Education

Our continuing education, held in Hastings, and by video link to Wairoa and Waipukurau, covered a variety of topics:

- Opioid Substitution Treatment (OST) - with six presenters from the OST service and Rory Bashnick, the pharmacist liaison with the OST team
- use of the updated clinical portal for the DHB,
- medicines adherence
- medicinal cannabis - presented by Vanessa Brown one of our clinical pharmacist facilitators
- engaging Pasifika - connecting culture with care
- whakawhanaungatanga - presented by John Barry (JB) Heperi Smith, Senior Advisor, Cultural Competency for Māori Health at Hawke's Bay DHB.

We supported two pharmacists to attend the Society's 2019 conference and two pharmacists to attend the New Zealand Society for the Support of Diabetes pharmacist study day,

with short updates on these conferences presented at our continuing education sessions.

Branch members also attended the "Incubator Vocational Guidance" sessions at the hospital encouraging local students to consider careers in healthcare professions.

## Engaging Pasifika

At least 5% of Hawke's Bay's population are of Pacific origin, and that population swells by over 2000 recognised seasonal employment workers. The personal contact with the Pacific Health team has meant great relationships have been forged between them and pharmacy, helping decrease some of the health inequities faced by this group. At our Engaging Pasifika session (as with all our meetings) we gave a koha of Hawke's Bay produce to the speakers and the response was that this, together with a basket of fresh fruit, was highly culturally appropriate.

## Tikanga Māori

John Barry (JB) Heperi Smith, the Senior Advisor, Cultural Competency for Māori Health at the Hawke's Bay DHB presented our continuing education session "Whakawhanaungatanga." It was an amazing journey for us.

He has helped us run our meetings with tikanga Māori in full mind. We now understand far more about Te Matau-a-Māui, the fishhook of Maui made from the jawbone of Māui's grandmother.

We also understand more about the vision of Te hauora o te Matau-ā-Māui (Healthy Hawke's Bay), which is "excellent health services working in partnership to improve the health and well-being of our people, and to reduce health inequities within our community."

We also understand more about the values:

- Rārangā te tira – Working together in partnership
- He kauanuanu – showing respect
- Ākina – continuously improving what we do
- Tauwhiro- delivering high quality care.

### **Hawke's Bay Health Awards**

Special mention must be made of the team at Unichem Russell Street Pharmacy led by pharmacists Alex Chan, Samantha Chan (Tie) and Samuel Lin, who won the Supreme Award at the Hawke's Bay Health Awards for their Respiratory Warrant of Fitness (WOF) tool. The programme is about helping Māori and Pacific Island children breathe better and is being rolled out further in Hawke's Bay in 2020.

### **Emergency Planning**

The Society's Hawke's Bay branch is now an alternative route to communication during pandemic or emergency. We have a threefold emergency response plan in Hawke's Bay. With the measles epidemic and the coronavirus pandemic we have encouraged all community pharmacies to review their emergency planning procedures.

### **Branch Committee**

In 2019, my first full year as branch president, I have been supported in my role by Riani Albertyn (our past president) and Di Vicary. My secretary is Jess Dodds, treasurer Delwyn Simes and committee members, Natalie Fleming (who looks after pharmacists new to Hawke's Bay),

Christina Crawford and Jenny Motley (who run our intern support programme, assisted by many pharmacist mentors). We congratulate Emma Barton and Sebastian Moore on qualifying as pharmacists, and I am very pleased they are staying in the local workforce.

### **Chief Pharmacist**

Dan Bernal has left Hawke's Bay and his position of Chief Pharmacist has not been renewed. Di Vicary has been appointed as an interim measure and most of Dan's tasks have been shared out within the DHB, the Pharmacist Advisory Group and the branch. The branch is taking a greater role in continuing education and communication.

### **Gisborne**

Gisborne has had a quiet year. Pharmacists have attended DHB portfolio meetings and DHB continuing education sessions and a Pharmacy Guild webinar. We look forward to connecting (via technology solutions) with them in 2020 for education, intern support and social networking.

### **Susan Donaldson**

BRANCH PRESIDENT





## Central Districts

This year was a big year for pharmacy with big discussions around the new Therapeutic Products Bill being proposed and our local DHB discussing how we can better utilise the pharmacist workforce.

### April

We conducted our Annual General Meeting (AGM) and a workshop on the new Therapeutic Products Bill (the Bill) which was kindly organised by Clare Hynd and Fiona Bradley. We discussed different aspects of the Bill and how this would affect pharmacy practice. It was a lively discussion with many participating and many interesting points were raised leaving us all motivated to give feedback on the Bill.

### June

The MidCentral PHO child health team did a presentation on child health asthma and eczema which was timely as we tend to see these conditions get worse at this time of the year.

### August

We had our yearly Hospice continuing education evening session which was kindly organized by our palliative care clinical pharmacist, Denise Hewitt.

### October

Jacob organised an evening session to practise scenarios with the local intern pharmacists in preparation for their upcoming assessment centre in November. This was once again a very fun evening with many kind pharmacists participating to make it happen. The interns found it very useful to get a feel of what assessment centre would be like and what they needed to work on.

### November

Lisheng Liu, our early career pharmacist, gave a talk about his experience at the Pharmaceutical Society of Australia's 2019 conference in Sydney and what he learnt there.

Also, we took part in a workshop which was facilitated by Renee Smith-Apanui and Clare Hynd. The project was called 'Ora Connect: understanding whānau journeys with prescription medicines.' They showed us their findings from work in the local area on how health care is perceived by whānau from GP to pharmacy to Work and Income New Zealand (WINZ), which was very eye opening and helped us see this journey and the struggles through the eyes of the patient.

### Branch committee

Overall it has been another rewarding year working with a great team, who I continue to learn from and admire for their hard work and dedication to our profession.

I would love to hear about what our members would like us to work on this year so please do not hesitate to send me an email, use our Facebook page or just see me in person at the branch meetings.

Thank you for giving me the opportunity to serve as your branch president.

### Ali Alwash

BRANCH PRESIDENT



# Wellington

We had a full year in 2019 and a real highlight was our joint continuing education (CE) session in September which we had a great turn out of doctors, nurses, pharmacists, technicians and other health professionals.

“Having a range of healthcare professionals at this session was a great opportunity to hear different perspectives and a chance to socialise.”

Our Intern Meet and Greet and End of Year Dinner events were also well received.

“It’s a really good opportunity to get to know your peers and meet some people you can contact if you have troubles throughout the year”.

We have settled into our new CE session location and look forward to trialling some new exciting ideas in 2020.

Our 2019:

- › **February** – Intern Potluck Dinner
- › **March** – Therapeutics Products Bill CE session
- › **April** – Trimethoprim and emergency contraceptive pill reimbursement
- › **June** – Transgender CE Session

- › **August** – First Aid Course CPR Level 4 and Full Certificate
- › **September** – Joint CE session “transforming health through nutrition”
- › **October** – Intern Assessment Centre Workshop
- › **November** – Intern Post Assessment Centre Dinner/ committee thank you

We sent our Vice President Natasha Nagar to the Society’s conference in Auckland, where she had a great experience. We look forward to continuing this in 2020, with a call for applications to attend the conference for Wellington branch members sent out in March.

I had my first full year as president and really enjoyed learning the ropes and would like to thank my committee for all their support and patience. A special mention to Natasha Nagar as vice president for her enthusiasm and constant encouragement throughout the year.

On behalf of the committee I would like to say a huge thank you to all our pharmacists, interns and technicians who continue to support us. We are passionate about pharmacy in New Zealand and are excited for our future. We will continue to support our local pharmacy community and happy to help where we can.

**Brooke McKay**

BRANCH PRESIDENT



## Nelson Marlborough

The vision from 2019 was to re-engage members of the branch - both pharmacists and technicians.

This year the branch provided financial support to three early career pharmacists across Nelson and Marlborough to attend the Society's 2019 conference in Auckland. We also surveyed pharmacists across the region as to what topics they would be interested in for future continuing education sessions.

Both areas appreciated a visit from Ann Privett and Shirena Vasan from the Society's College Education and Training team who took us all through the value of Medicine Use Review (MUR) and Pharmacy Accuracy Checking Technicians (PACT) training. The meeting was very well attended in both sites by both pharmacists and technicians. This has spurred interest in forming peer review groups with one being formed in Nelson co-ordinated by Liz Spiers.

Pharmacists in the Nelson region attended a presentation by the Christchurch Pegasus Group who presented their model and it's likely that peer groups will now move forward using the multi-disciplinary format. Megan Peters is now an official lead for Pegasus small group training.

Models of Care continues to be an evolving initiative across the region, and we are fortunate to have Megan advocating for pharmacy at these forums. It would be great if we could have more pharmacists from both primary and secondary care involved in this important piece of work. We would also like to encourage and support further involvement from our early career pharmacists and technicians in branch activities.

This year saw some changes in the Nelson Marlborough branch committee. Following our Annual General Meeting (AGM) we now have a committee of 12 members. The branch is now jointly chaired by Dee Magee (Owner, Victory Square Pharmacy) and Annie Egan (Pharmacist, Nelson Hospital) with Rebecca Lukey (Pharmacist, Nelson Hospital) keeping us in line as secretary.

Megan Peters stepped aside as president and has taken on the education and training role within the branch. We would like to take the opportunity to pass on a huge thank you to Megan for her tireless work as president during a tumultuous time of contract negotiations! Megan is a passionate advocate for clinical pharmacy and practices what she preaches by always looking to work at the top of her scope.

We are indebted to Simon Hurley who stepped up in his capacity as Marlborough representative to initiate education and training in the Wairau region. We also acknowledge his support in taking the first steps to engage Marlborough pharmacists to continue as a sub-branch.

There are many pharmacists working in the background to represent pharmacy services on various committees and education programmes and the branch would like to gratefully acknowledge their considerable time and effort. We also acknowledge the Primary Health Organisation (PHO) for including pharmacists and technicians in their training and education events.

We wrapped up the year with a most excellent Christmas party feeling happy with our achievements.

### **Annie Egan and Dee Magee**

BRANCH PRESIDENTS



## Canterbury and West Coast

The past year was another year of development for the branch. Work was carried out to further clarify the role of the Society as a branch in Canterbury. We are very lucky in Canterbury with the various organisations that support the profession and provide education opportunities.

The branch took the focus of support further over the past year. This was fulfilled through several activities.

Financial support was provided for two early career pharmacists, Brittney Young and Abbey Evison, to attend the Pharmaceutical Society of Australia's conference in Sydney. Partial cost reimbursement was provided for our local

members who attended the Pharmaceutical Society of New Zealand's conference in Auckland. Both educational events were inspiring, provided a platform for networking and provoked conversations about the future of pharmacy.

Locally the theme of support continued throughout the year. After the tragic events of the March 15 mosque attacks the branch took on the role of helping our members to grieve and to seek out further help. Thank you to Richard, Ian and the team at the Society's head office who were at the end of the phone to help us help those in need.

Work began for our newly registered pharmacists. There has been a need to connect with those who are stepping out into the profession after internship and for those first few years, the world of pharmacy can be daunting and difficult to navigate at times. Along with Debbie from the Evolve Intern Training team, Canterbury Community Pharmacy Group (CCPG) and Pegasus Health a plan is developing to make this transition as smooth as possible.

An evening was held where approximately 20 members attended, mostly newly registered pharmacists, to discuss how the branch can better support this transition. The key ideas that arose to be addressed were mentorship, information on different career pathways, information on the different roles of the groups who represent pharmacy, social events and networking occasions. Over the next year we aim to implement these ideas.

As we do each year, we provided support to our interns. We had a welcoming evening, several sessions through the year and a dinner to wrap up a successful year. I had the absolute pleasure to announce Annaliese Cooper, who completed her internship on the West Coast, as the prize winner of Canterbury-West Coast Intern of the Year. Well done to all our interns and I wish you all the best moving forward into your career as pharmacists.

The branch also hosted an evening with Medicines Control to hear the progress and findings from the spot audits. This was eye opening and was a good opportunity for members to ask the hard questions.

To improve appreciation of what is happening locally and the diversity of roles that pharmacists hold in the area, we embraced World Pharmacist Day. Members wrote brief statements about their role and what they enjoy about being a pharmacist. These positive statements were collated and shared locally through the network. This small project had a powerful response and was then shared nationally via the Society's weekly newsletter. Thank you to everyone who shared their thoughts.

As we move forward into a new year and a new decade, I am very excited about what is in store for 2020. Good progress is already underway. There will be some changes to the committee this year and I am excited for what lies ahead.

**Aleisha Whyte**

BRANCH PRESIDENT





# South Canterbury

In 2019, the South Canterbury branch committee remained the same as for 2018 with Karen Kennedy as President, Jan High as Vice-President, Victoria Holden as Secretary, Iris Bae as Treasurer and Anna Bridson as Social Events. We were delighted to welcome Natasha Kake to the committee as the first pharmacy technician representative.

South Canterbury continues to be a small, but active branch. Our focus is on fostering pharmacist excellence, fostering education and fostering opportunities for pharmacists to network and provide support and mentoring to each other. We believe that these three areas interlink well.

We have a strong focus on supporting our local pharmacists to achieve clinical excellence. For the last three years, we have worked in partnership with South Canterbury DHB and Pegasus Health to provide localised Pharmacist Small Group Education that fosters pharmacists to share, question and improve their practice in a local context using evidence to support change. Pharmacists are encouraged to share relevant learning from these sessions with their pharmacy technician and pharmacy assistant colleagues to lift standards across the pharmacy profession. Two Pharmacist Small

Group Education leaders have been trained by Pegasus Health to lead this education, Karen Kennedy and Jan High.

We are very grateful to South Canterbury DHB for funding a significant part of the programme with pharmacy owners also contributing to the cost for their pharmacists to attend. Unfortunately, this funding will not continue in 2020, with pharmacy owners and individual pharmacists being required to cover the cost of the education package. South Canterbury DHB will continue to support with venue, food, and material costs, including distribution.

Pharmacist Small Group Education topics covered in 2019 included:

- Live and Let Liver
- Difficult Decisions
- Refugee and Migrant Health
- Gout
- Serious Mental Illness
- Physical Effects.

The sessions were well-received with high evaluation scores. This assessed learning allowed Group 2 ENHANCE points to be allocated for the pharmacists as well as cultural competency points. These were uploaded for the pharmacists in conjunction with ENHANCE. In addition to the comments that Jan and I receive when we are leading these education topics, the value that pharmacists place on this education is shown by the pharmacy owners and a locum pharmacist continuing to fund it.

A strong profession requires our relationships to be strong so we can communicate and work together well so this is another focus for the branch committee. There is a 'Meet and Greet with Nibbles' time, (supported by Primary and Community Services, South Canterbury DHB) before Pharmacist Small Group Education. This allows pharmacists to interact which helps foster the friendly, collegial relationships that we have. We also like to organise one social function in the year to support our colleagues to keep in touch and had this pre-Christmas at Street Kitchen, a local Timaru venue. This year, pharmacy technicians were invited also.

We had intended to run pharmacy technician education during 2019, but this has been put forward to 2020. Our pharmacy technician representative has organised a contact list of South Canterbury pharmacy technicians who are interested in being involved with this, and any social activity that is organised.

Another focus of the South Canterbury branch is to build relationships across our local community. We continue to work closely with South Canterbury DHB to understand local needs for our population and how our pharmacists can contribute to improving outcomes for patients. In conjunction with pharmacy owners, a couple of options to support patients around smoking cessation and asthma using the asthma control test were put forward to South Canterbury DHB. These were not accepted by the DHB who decided in favour of looking at pharmaceutical drug waste, however, we are still waiting for this project to be set up.

There has been no other local commissioning that we have been involved with, with South Canterbury community pharmacists being unable to partake in any funded medication management services. South Canterbury DHB has employed a pharmacist to work within the Integrated Community Assessment and Treatment Team (ICATT) under Accident Compensation Corporation (ACC) falls funding. This pharmacist is undertaking Medicine Use Reviews with patients and is working to foster relationships across general practice, community pharmacy and the hospital, especially to promote the value of pharmacists as part of the multi-disciplinary team, but especially the value pharmacists can add to support better patient outcomes through the provision of medication management services.

Our pharmacists are fortunate to be able to attend the local Primary Care Symposium, an annual education day set up and funded by South Canterbury DHB through their Primary Health Organisation function. A variety of speakers present, and this day provides an opportunity to be alongside GPs and practice nurses. This was held in March 2019 and was well-received by the pharmacist attendees. We are asked to contribute ideas for speakers.

Our branch Annual General Meeting (AGM) was held on 24 April 2019. Disappointingly, we only had one pharmacist other than our branch committee members attend. We intend to look at having a speaker for the AGM in 2020 to stimulate attendance.

**Karen Kennedy**

BRANCH PRESIDENT





## Otago

Otago branch has made fantastic progress over the last couple of years. Our aim for 2019 was to improve engagement within our profession. This was highly successful, as evidenced by the growing number of attendees at our education sessions and by the engagement of members via our online platform.

We've been successfully trialling a collaborative approach to education by joining forces with the Society's Southland branch to share our education evenings via Zoom.

Otago faces the geographical restriction of being a very spread out branch, with members living over 200 kilometres away from Dunedin. We are endeavouring to make every session available for those far and wide, including education sessions not hosted by the Otago branch.

For 2020 we're continuing to improve our engagement with pharmacists and technicians, and we are aiming to enable Group 2 ENHANCE points and/or cultural competency points to be allocated where applicable.

Continuing education sessions that we held in 2019 were well attended and very successful. We acknowledge and thank all our presenters for their time and expertise.

These sessions included:

- Diabetes New Zealand hosted a SmartLog training evening
- The Ministry of Health presented an overview of the New Zealand Electronic Prescription Service (NZePS)
- Glaxo Smith Kline (GSK) hosted a topic about asthma management in the pharmacy
- Common Musculoskeletal Presentations was hosted by a local physiotherapist, Joshua Ong
- Green prescriptions and pharmacy was hosted by Chanél Pienaar (Sport Otago).

We were very privileged to be able to offer funding for a local branch member to attend the Māori Pharmacists Association symposium. We have set in place the ability for branch members to apply for funding for educational events and sessions for 2020.

We're always striving to support our intern members, and we did this by hosting several sessions for them, including a law and calculation training day, and a pre-assessment centre training day and a preceptor and intern meet-and-greet evening.

The Otago branch would like to acknowledge and thank the University of Otago School of Pharmacy for allowing us to utilise their premises and technical expertise for our committee meetings and continuing education sessions.

A big thank you to our branch committee members for their contribution, time and support during 2019. I really appreciate your contributions and know we wouldn't be as successful a committee without you all.

I look forward to the challenges and rewards that 2020 will bring and can't wait for the excitement of sharing it with you.

### **Janelle Stevenson**

BRANCH PRESIDENT



# New Zealand Pharmacy Education and Research Foundation

The New Zealand Pharmacy Education and Research Foundation (the Foundation) was established in 1967 as a charitable trust for the benefit of the pharmacy profession.

Originally established with a seeding grant from the Pharmaceutical Society, the Foundation has sought and attracted tax deductible grants and donations from pharmacists and from members of the pharmaceutical industry.

These funds have been invested by honorary Trustees who manage the fund, which currently stands at approximately \$5 million.

The interest and dividends received from the fund's investments are allocated to applicants by a Foundation Board that meets in May and November each year. In addition to grants for specific projects, the Foundation also funds some specific prizes.

The Foundation would like to thank all the pharmacists and the Pharmacy Defence Association for their generous donations during 2019.

In 2019, the Foundation Board was able to distribute \$97,161.00 to successful applicants. The Board also provided \$18,000.00 to Auckland University for three summer studentships and \$18,000.00 to Otago University for summer studentships.

The surplus funds available for grants are carried over to the following year for distribution.

## 2019 Funded Projects

- Bioerodable, sustained dual drug delivery system to provide prolonged, post-operative pain relief following joint surgery after a single injection.
- Mental health literacy of community pharmacists in New Zealand.
- Investigating changes in the brain structure and function of individuals with psychosis experiences.
- Exploring pharmacists' views on workplace bullying in New Zealand.
- What is the New Zealand public's demand for and impression of pharmacists?
- Sexual health services in community pharmacies – where are we at?
- Investigating peripheral immune profile in treatment-resistant depression: response to ketamine.
- An investigation into the impact of pharmacy promotional videos on public awareness in New Zealand.

## Summer Studentships

### Auckland University

- An investigation into the accessibility of medicines for children in New Zealand.
- Impact of liposomal size in their intracellular trafficking.
- Pacific youth views on pharmacy in NZ as a study and career pathway.

### Otago University

- How has pharmacy school changed the perceptions, attitudes and personalities of pharmacy students: A longitudinal analysis from 2nd to 4th year.
- Conquering sexually transmitted infections with social media: A design-based research study.
- Hospital Pharmacy in New Zealand over time.

## Intern Prizes

The intern prizes of \$500 each for the best patient-centred care assignments were awarded to three interns in 2019, being one hospital pharmacy intern; Emma Barton and two community pharmacy interns; Kane Nathan and Neha Naidu.

## NZHPA Conference Prize

The Foundation sponsors the Dr L Berry Award for the best paper overall at the NZHPA Conference and this year it was awarded to Anthea Gregan, for her paper "Understanding the Factors Influencing Prescriber Uptake of Pharmacist Recommendations in Secondary Care."



# Financial Overview

It is the National Executive's pleasure to present the financial results for the Society for the year ended 31 December 2019.

The Society made a small surplus of \$17,780 for the year. Compared to 2018, total revenue from activities increased by 0.2% and total expenses were up 0.9%.

The accounts in 2019 have undergone some minor changes from the previous year, and both the comparative figure for 2018 has been changed in the same way to aid comparison. For example, some costs previously only put in intern training and assessments has been moved as appropriate into catering and venue hire, travel and accommodation, and contractors and preceptors, and much of what was placed into sundry expenses in 2018 was more appropriately identified in 2019. This has occurred with a change in finance personnel and improvements in categorisation.

In order to maintain the high level of service and support to our members, a modest 2% increase in membership subscription fees was necessary. Income from our core business activities was mixed – intern fee income was up slightly, while other activities slowed, particularly publication sales and a drop in sponsorship. A change in

course requirements for 2019 meant sales of textbooks no longer occur.

The Society conference, held in Auckland in August, was well attended, benefitting all who participated. Attendance fees and sponsorship covered the conference running and administration costs.

While overall income has increased this was offset by higher operating costs. Keeping up to date with technology improvements ensures our IT costs keep increasing faster than inflation. This included upgrade work on ENHANCE and additional costs for the learning management software above that expected. Travel and accommodation expenses rose as a result of increased activities.

The Society continues to provide administrative and accounting services to support various other pharmacy organisations. This includes contracted services for the Pharmacy Defence Association, New Zealand Hospital Pharmacists' Association and New Zealand Pharmacy Education and Research Foundation. The Society also provides support to the Clinical Advisory Pharmacists' Association.

The Society is in a strong financial position – total assets and liabilities are very little changed from the previous year end. Inwards and outwards cash flows from operating activities were almost identical for the year. Investments are being

managed to earn additional interest income and to ensure funds are available when required.

The Finance and Audit Committee (the Committee) has been delegated certain responsibilities that it carries out on behalf of the National Executive. These responsibilities include providing strategic direction during the preparation of the annual budget, reviewing financial performance against budget, approving both the annual budget and annual financial statements for presentation to the National Executive and reviewing and adopting financial policies.

The Committee meets five times per year. Committee meetings take place prior to National Executive meetings so that a summary report can be presented to the full National Executive.

Kirsten Simonsen, who held the Society's Treasurer role since 2017, stepped down in 2019. The Society acknowledges and thanks Kirsten for her service.

## **Dr Natalie Gauld**

NATIONAL TREASURER

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### ACKNOWLEDGMENTS

I would like to acknowledge the Society's finance team (Ken Lankshear and Fran Ling) for preparing the Financial Overview and Financial Statements for the 2019 Annual Report.

# Financial Statements

For the year ended 31 December 2019

## Statement of Comprehensive Revenue and Expense

For the year ended 31 December 2019

		31 December 2019	31 December 2018
	Note	(\$)	(\$)
<b>Revenue from exchange transactions</b>			
Membership subscriptions	3a	1,618,204	1,508,485
Operating activities	3b	1,609,603	1,705,442
Accounting and administration services	3c	500,891	490,975
Interest income	3d	46,862	44,273
Other revenue		21,579	39,162
<b>Total revenue from exchange transactions</b>		<b>3,797,139</b>	<b>3,788,337</b>
<b>Revenue from non-exchange transactions</b>			
Intern Funding – Ministry of Health		970,524	970,524
<b>Total revenue from non-exchange transactions</b>	3e	<b>970,524</b>	<b>970,524</b>
<b>Total exchange and non-exchange revenue</b>		<b>4,767,663</b>	<b>4,758,861</b>
<b>Expenses</b>			
Governance	4a	165,437	170,238
Personnel expenses	4b	3,187,620	3,165,897
Other expenses	4c	1,396,826	1,369,347
<b>Total expenses</b>		<b>4,749,883</b>	<b>4,705,482</b>
<b>Net (deficit)/surplus for the year</b>		<b>17,780</b>	<b>53,379</b>
Other comprehensive revenue and expense		-	-
<b>Total comprehensive revenue and expense for the year</b>		<b>17,780</b>	<b>53,379</b>

## Statement of Movements in Equity

For the year ended 31 December 2019

		31 December 2019	31 December 2018
	Note	(\$)	(\$)
Net equity at the beginning of the year		1,429,264	1,375,885
Total recognised comprehensive revenue and expense		17,780	53,379
<b>Net equity at the end of the year</b>		<b>1,447,044</b>	<b>1,429,264</b>

The Statement of Accounting Policies and Notes to the Financial Statements on pages 47 to 52 form part of the financial statements

## Statement of Financial Position

As at 31 December 2019

	Note	31 December 2019 (\$)	31 December 2018 (\$)
<b>Assets</b>			
<b>Current assets</b>			
Cash and cash equivalents		294,847	559,520
Receivables and accrued income	5	1,273,648	1,310,683
Prepayments		188,144	50,336
Publication stock on hand		3,392	6,784
Investments	6	1,370,432	1,121,344
<b>Total current assets</b>		<b>3,130,463</b>	<b>3,048,667</b>
<b>Non-current assets</b>			
Property, plant and equipment	7	158,503	185,580
Intangible assets	8	351,628	455,534
<b>Total non-current assets</b>		<b>510,131</b>	<b>641,114</b>
<b>Total assets</b>		<b>3,640,594</b>	<b>3,689,781</b>
<b>Liabilities</b>			
<b>Current liabilities</b>			
Payables and accruals	9	330,541	429,407
Income in advance		1,744,437	1,690,248
Employee entitlements		118,572	140,862
<b>Total current liabilities</b>		<b>2,193,551</b>	<b>2,260,517</b>
<b>Net assets</b>		<b>1,447,044</b>	<b>1,429,264</b>
<b>Equity</b>			
Accumulated comprehensive revenue and expense	10	1,221,982	1,198,202
Special funds	11	225,062	231,062
<b>Total equity</b>		<b>1,447,044</b>	<b>1,429,264</b>

On behalf of the National Executive



**Ian McMichael**  
President  
12 June 2020



**Natalie Gauld**  
Treasurer  
12 June 2020

## Statement of Cash Flows

For the year ended 31 December 2019

	31 December 2019 (\$)	31 December 2018 (\$)
<b>Cash flows from operating activities</b>		
<b>Cash was received from:</b>		
Membership subscriptions	1,737,080	1,508,445
Operating activities	2,574,239	2,668,491
Accounting and administration services	479,127	490,975
Interest	32,474	44,273
Net GST	18,383	109,129
Other revenue	21,579	39,182
	<b>4,862,882</b>	<b>4,860,475</b>
<b>Cash was applied to:</b>		
Payments to suppliers and employees	4,865,655	4,554,162
	<b>4,865,655</b>	<b>4,554,162</b>
<b>Net cash flows from / (used in) operating activities</b>	<b>(2,773)</b>	<b>306,313</b>
<b>Cash flows from investing activities</b>		
<b>Cash was received from:</b>		
Maturities of term deposits	1,765,300	608,721
	<b>1,765,300</b>	<b>608,721</b>
<b>Cash was applied to:</b>		
Investment in term deposits	2,000,000	867,585
Purchase of property, plant and equipment, and intangible assets	27,200	80,956
	<b>2,027,200</b>	<b>948,541</b>
<b>Net cash flows from / (used in) investing activities</b>	<b>(261,900)</b>	<b>(339,820)</b>
<b>Net cash flows from financing activities</b>		
	-	-
<b>Net decrease in cash and cash equivalents</b>	<b>(264,673)</b>	<b>(33,507)</b>
Add cash and cash equivalents at the start of the year	559,520	593,027
<b>Cash and cash equivalents at the end of the year</b>	<b>294,847</b>	<b>559,520</b>

The Statement of Accounting Policies and Notes to the Financial Statements on pages 47 to 52 form part of the financial statements



## Notes to the Financial Statements

For the year ended 31 December 2019

### 1 Reporting entity

The Pharmaceutical Society of New Zealand Incorporated (the Society) is a voluntary body that provides professional support, education, training and career development for pharmacists and technicians. The financial statements comprise the Society's central office, which excludes any branches.

The Society is incorporated under the Incorporated Societies Act 1908 and is registered under the Charities Act 2005.

### 2 Summary of Significant Accounting Policies

#### Basis of preparation

These financial statements have been prepared in accordance with New Zealand Generally Accepted Accounting Practice (NZ GAAP). For the purposes of complying with NZ GAAP, the Society is a public benefit entity (PBE). In the case of the Society, NZ GAAP means Public Benefit Entity International Public Sector Accounting Standards Reduced Disclosure Regime (PBE IPSAS RDR). Under the Accounting Standards Framework issued by the External Reporting Board, the Society is eligible to apply PBE IPSAS RDR because it is not publicly accountable and has total expenses less than or equal to \$30 million. The Society has elected to apply all RDR concessions available.

The financial statements have been prepared in New Zealand dollars, which is the Society's functional currency. All financial information has been rounded to the nearest dollar.

The financial statements have been prepared in accordance with historical cost concepts. Certain comparatives have been restated to align with current year financial statements.

#### Specific Accounting Policies

The following specific accounting policies that materially affect the measurement of the financial performance, financial position and cash flows have been applied.

#### Donated services

The work of the Society is dependent on the voluntary services of many members. Due to the difficulty in determining the value of the donated services with sufficient reliability, donated services are not recognised in the Statement of Comprehensive Revenue and Expense.

#### Taxation

The Society was registered under the Charities Act 2005 on 30 June 2008 and therefore is not subject to income tax from that date.

The Statement of Comprehensive Revenue and Expense has been prepared so that all components are stated exclusive of Goods and Services Tax (GST). All items in the Statement of Financial Position are stated net of GST, except for accounts receivable and accounts payable. All items in the Statement of Cash Flows are stated exclusive of GST. The net GST received or paid during the year for operating, investing and financing activities is included as part of operating cash flows.

#### Significant management judgements

There were no significant judgements that require disclosure other than those already made in this report.

### 3 Revenue

Revenue is recognised when it is probable that the economic benefits associated with a transaction will flow to the Society and when the amount of revenue can be reliably measured. Revenue is measured at the fair value of the consideration receivable. The following specific recognition criteria are used:

#### a. Membership subscriptions

The Society's annual subscription year for pharmacists and technicians is 1 January to 31 December. Fees are due 1 January. Membership income is recognised on a monthly basis throughout the year in line with services provided.

#### b. Operating activities

	31 December 2019	31 December 2018
	(\$)	(\$)
Continuing education enrolments and sales	239,756	272,108
Intern course fees and funding	1,059,033	1,040,095
Publication sales	-	30,678
Self-Care membership	156,000	173,980
Sponsorship	85,150	105,892
Sundry sales revenue	26,925	54,063
Symposia revenue	42,739	28,626
<b>Total operating activities</b>	<b>1,609,603</b>	<b>1,705,442</b>

#### • Continuing education revenue

Income from course enrolments are recognised once the event has been held.

#### • Intern course fees

Intern fees are recognised evenly over the period of the internship.

#### • Publication sales

Income from the sale of publications is recognised when ownership of the goods is transferred to the purchaser.

#### • Self-Care membership

Self-Care membership income is recognised evenly over the period of membership.

#### • Sponsorship

Sponsorship relating to a specific event is recognised when the event is held. Where provision of sponsorship extends over a period of time, revenue is recognised evenly over the contract period.

#### • Symposia revenue

Income from symposia enrolments are recognised once the event has been held.

#### c. Accounting and administration services

Income from the provision of accounting and administration services is recognised evenly over the period the services are provided.

#### d. Interest income

Interest is recognised as it is earned on a time proportion basis using the effective interest method.

#### e. Intern funding

Funding received for the Intern Training Programme from the Ministry of Health is recognised in the period to which it relates.

## 4 Expenses

All expenditure is recognised when billed or an obligation arises on an accrual basis, except for donated services.

	31 December 2019 (\$)	31 December 2018 (\$)
<b>a) Governance</b>		
National Executive fees	63,156	65,621
National Executive expenses	59,455	70,255
Honoraria	27,625	23,555
Other governance expenses	15,201	10,807
<b>Total governance</b>	<b>165,437</b>	<b>170,238</b>
<b>b) Personnel</b>		
Staff remuneration	2,112,868	2,111,493
Other personnel expenses	78,779	43,586
Contractors and preceptors	995,973	1,010,818
<b>Total personnel</b>	<b>3,187,620</b>	<b>3,165,897</b>
<b>c) Other expenses</b>		
Administration expenses	221,807	229,540
Audit fees	21,350	22,000
Catering and hire	187,059	195,732
Depreciation and amortisation	158,182	148,042
Direct costs of product sold	13,346	44,571
Grants, scholarships and prizes	46,136	59,892
Information technology	194,480	142,043
Telecommunications	31,246	29,587
Occupancy costs	128,323	140,614
Printing & Stationery	109,571	112,978
Professional services and expenses	28,591	27,338
Travel and accommodation	225,856	183,702
Other expenses	30,879	33,308
<b>Total other expenses</b>	<b>1,396,826</b>	<b>1,369,347</b>

### Accounting Policies

#### Employee entitlements

The liability for employee benefits include annual leave and accumulating sick leave that are expected to be settled within 12 months of balance date. These are measured at the undiscounted amount expected to be paid based on current rates of pay.

#### Income in advance

Only income that is attributable to the current financial period is recognised in the Statement of Comprehensive Revenue and Expense. The remaining income and any membership fees paid in advance of the due date of 1 January is recognised in the Statement of Financial Position as Income in Advance.

## 5 Receivables and accrued income

Membership is invoiced in December in the preceding year and the receivable is recognised when the invoice is raised. No revenue is recognised until the period in which the membership relates. For all other income, a receivable or accrued income is recorded at the same time the revenue is recognised.

	31 December 2019 (\$)	31 December 2018 (\$)
Trade receivables	1,239,089	1,303,775
Related party receivables (see note 13)	1,558	(2,092)
Accrued income	33,001	9,000
<b>Total receivables and accrued income</b>	<b>1,273,648</b>	<b>1,310,683</b>

## 6 Investments

	31 December 2019 (\$)	31 December 2018 (\$)
Term deposits	1,370,425	1,121,344
<b>Total investments</b>	<b>1,370,432</b>	<b>1,121,344</b>
Total investments comprises:		
Accrued interest	7,003	4,521
Investments maturing within 3 months	209,689	709,176
Investments maturing within 3 to 6 months	1,003,740	407,647
Investments maturing after 6 months	150,000	-
<b>Total investments</b>	<b>1,370,432</b>	<b>1,121,344</b>

## 7 Property, plant and equipment

	Office equipment	Library and art collection	Furniture and fittings	Leasehold improvements	Computer equipment	Total
	(\$)	(\$)	(\$)	(\$)	(\$)	(\$)
<b>2019</b>						
Cost	13,074	5,000	121,611	221,413	35,535	392,633
Accumulated depreciation	5,210	-	94,091	118,439	16,390	234,130
<b>Net book value</b>	<b>7,864</b>	<b>5,000</b>	<b>27,520</b>	<b>102,974</b>	<b>15,145</b>	<b>158,503</b>

	Office equipment	Library and art collection	Furniture and fittings	Leasehold improvements	Computer equipment	Total
	(\$)	(\$)	(\$)	(\$)	(\$)	(\$)
<b>2018</b>						
Cost	15,299	5,000	121,336	221,413	152,116	515,164
Accumulated depreciation	11,273	-	81,930	103,904	132,477	329,584
<b>Net book value</b>	<b>4,026</b>	<b>5,000</b>	<b>39,406</b>	<b>117,509</b>	<b>19,639</b>	<b>185,580</b>

	Office equipment	Library and art collection	Furniture and fittings	Leasehold improvements	Computer equipment	Total
	(\$)	(\$)	(\$)	(\$)	(\$)	(\$)
<b>2019</b>						
Opening balance	4,026	5,000	39,406	117,509	19,639	185,580
Additions	4,356	-	275	-	2,569	7,200
Disposals (Cost)	(6,581)	-	-	-	(123,150)	(129,731)
Disposals (Accumulated Depreciation)	6,581	-	-	-	123,510	129,731
Depreciation expense	(518)	-	(12,161)	(14,535)	(7,063)	(34,277)
<b>Closing balance</b>	<b>7,864</b>	<b>5,000</b>	<b>27,520</b>	<b>102,974</b>	<b>15,145</b>	<b>158,503</b>

### Accounting Policies

Items of property, plant and equipment are recorded at cost less accumulated depreciation and accumulated impairment losses. Cost includes those expenses that are directly attributable to the purchase of the asset. Subsequent expenditure that extends or increases an asset's service potential is capitalised.

Depreciation is provided on a straight-line basis on all property, plant and equipment, except for the library and art collection, to allocate the cost or value of the asset (less any residual value) over its useful life. The estimated useful lives of the major classes of property, plant and equipment are as follows:

Office equipment	4 - 5 years	Furniture and fittings	8 - 10 years
Computer equipment	3 - 4 years	Leasehold improvements	12 - 15 years
Library and art collection	Not depreciated		

The useful lives, depreciation methods and residual values are reviewed at each balance date and adjusted to reflect any change in the expected pattern of the consumption of the future economic benefits or service potential embodied in the asset.

## 8 Intangible assets

The Society's intangible assets are its websites, membership system and learning management system.

	31 December 2019	31 December 2018
	(\$)	(\$)
Cost	799,266	851,207
Accumulated amortisation	447,638	395,673
<b>Total intangible assets</b>	<b>351,628</b>	<b>455,534</b>
Opening balance	455,534	503,775
Additions	-	134,545
Capital Work in Progress	20,000	(72,035)
Disposals (Cost)	(71,941)	-
Disposals (Accumulated Amortisation)	71,941	-
Amortisation	(123,906)	(110,770)
<b>Total intangible assets</b>	<b>351,628</b>	<b>455,534</b>

### Accounting Policies

All intangible assets were acquired separately. These assets are initially recorded at cost. Internal staffing costs associated with the setup of these assets is not capitalised but is recorded in surplus or deficit in the period in which it is incurred.

After initial recognition, intangible assets are carried at cost less accumulated amortisation and less accumulated impairment losses. The cost of the assets is amortised on a straight-line basis over their useful lives. It has been determined that these assets have finite useful lives of seven years. Amortisation is recorded as part of Depreciation and Amortisation expenses in the Statement of Comprehensive Revenue and Expense. At each balance date, the useful lives and amortisation methods are reviewed to determine if they are still appropriate. These are changed, if necessary, to reflect the changed pattern of consumption of the future economic benefits or service potential embodied in the assets.

## 9 Payables and accruals

	31 December 2019	31 December 2018
	(\$)	(\$)
Trade creditors	55,227	27,270
GST payable	229,665	220,343
Accrued expenditure	45,649	181,794
<b>Total payables and accruals</b>	<b>330,541</b>	<b>429,407</b>

## 10 Financial Instruments

### Financial assets

Under PBE IPSAS 29 *Financial Instruments: Recognition and Measurement*, financial assets can be classified into one of four categories. The classification is determined on initial recognition and specifies how assets are subsequently measured and where any gains or losses are recognised.

The Society's financial assets have been classified as Loans and Receivables, being non-derivative financial assets with fixed or determinable payments that are not quoted on an active market. These assets comprise cash and cash equivalents, receivables and accrued income, and investments in term deposits.

Loans and Receivables are initially recognised at fair value plus transaction costs directly attributable to the acquisition of the asset. Subsequent measurement is at amortised cost using the effective interest method. Gains or losses arising when the asset is derecognised or impaired are recognised in surplus or deficit. If an asset has been impaired, the carrying amount is reduced through the use of an allowance account and the amount of the loss is recognised in surplus or deficit. Loans and Receivables are derecognised when the contractual rights to receive the cash flows are waived or expire.

### Cash and cash equivalents

Cash and cash equivalents are short-term, highly liquid investments that are readily convertible to known amounts of cash and which are subject to insignificant risk of changes in value. For the Society, these assets are bank accounts, on call deposits, and term deposits with registered banks having maturities of three months or less as at the date of acquisition.

### Investments in term deposits

These are term deposits with registered banks with maturity dates of more than three months from the date of acquisition.

### Carrying amount of loans and receivables

	31 December 2019	31 December 2018
	(\$)	(\$)
Cash and cash equivalents	294,847	559,520
Receivables and accrued income	1,273,648	1,310,683
Investments	1,370,432	1,121,344
<b>Total carrying amount of loans and receivables</b>	<b>2,938,927</b>	<b>2,991,547</b>

### Financial liabilities

The Society's financial liabilities comprise trade and sundry creditors, and accrued expenditure. Financial liabilities are initially recorded at fair value plus transaction costs directly attributable to the acquisition of the liability. Subsequent measurement is at amortised cost using the effective interest method. The liabilities are derecognised when the liability is extinguished. Gains or losses arising when the liability is derecognised are recorded in surplus or deficit.

The following table shows the carrying amounts of financial assets and financial liabilities as at 31 December 2019.

Financial assets not measured at fair value		Held-to-maturity	Loans and receivables	Available-for-sale	Financial liabilities	Total
- 31 December 2019	Note	(\$)	(\$)	(\$)	(\$)	(\$)
Cash and cash equivalents		-	294,847	-	-	294,847
Receivables and accrued income	6	-	1,273,648	-	-	1,273,648
Investments in term deposits	7	-	1,370,432	-	-	1,370,432
<b>Total</b>		<b>-</b>	<b>2,938,927</b>	<b>-</b>	<b>-</b>	<b>2,938,927</b>

Financial liabilities not measured at fair value		Held-to-maturity	Loans and receivables	Available-for-sale	Financial liabilities	Total
- 31 December 2019	Note	(\$)	(\$)	(\$)	(\$)	(\$)
Payables and accruals	10	-	-	-	330,541	330,541
<b>Total</b>		<b>-</b>	<b>-</b>	<b>-</b>	<b>330,541</b>	<b>330,541</b>

## 11 Equity

Equity is the members' interest in the Society and is measured as the difference between total assets and total liabilities.

Equity is disaggregated and classified into components to enable clearer identification of the specified uses that the Society makes of its accumulated surpluses. The components of equity are accumulated comprehensive revenue and expense, and special funds.

Special funds are those reserves subject to conditions of use, whether under statute or by a third party, and may not be revised without reference to the Courts or a third party.

	31 December 2019 (\$)	31 December 2018 (\$)
<b>Accumulated comprehensive revenue and expense</b>		
Balance at the beginning of the year	1,198,202	1,138,823
Comprehensive revenue and expense for the year	17,780	53,379
Net transfers from special funds	6,000	6,000
<b>Total accumulated comprehensive revenue and expense</b>	<b>1,221,982</b>	<b>1,198,202</b>
<b>Special funds</b>		
Benevolent fund – opening balance	87,752	87,752
Transfer (to)/from retained earnings	-	-
	87,252	87,752
Henderson bequest – opening balance	129,133	135,133
Scholarships paid – transfer to retained earnings	(6,000)	(6,000)
	123,133	129,133
Education fund – opening balance	14,177	14,177
Transfer (to)/from retained earnings	-	-
	14,177	14,177
<b>Total special funds</b>	<b>225,062</b>	<b>231,062</b>
Special funds – opening balance	231,062	237,062
Net transfer (to)/from retained earnings	(6,000)	(6,000)
<b>Total special funds</b>	<b>225,062</b>	<b>231,062</b>

## Benevolent fund

This fund is used to assist pharmacists and their families in times of crisis. Payments are at the discretion of a panel established by the National Executive.

## Henderson bequest

The Henderson bequest is a scholarship established to assist students experiencing financial hardship during their second year of a recognised pharmacy course.

## Education fund

The Education fund helps support the development and continuation of the Society's professional development and educational programmes.

Apart from the criteria mentioned above, there are no other formal restrictions over these funds.

## 12 Leases

The Society has entered into non-cancellable operating leases for premises and certain office equipment. Lease payments are recognised as an expense on a straight-line basis over the term of the lease. The significant leasing arrangements are:

- Premises – for a term of nine years with one right of renewal for a further three years.
- Photocopiers/printers – for a term of five years.
- Computer equipment – for a term of four years.
- Telecommunications equipment – for a term of three years.

	31 December 2019 (\$)	31 December 2018 (\$)
<i>Total operating lease obligations</i>		
Not later than one year	167,894	151,298
Later than one year and no later than five years	189,366	192,288
Later than five years	-	-
<b>Total operating lease obligations</b>	<b>357,260</b>	<b>343,586</b>

### 13 Related party transactions

#### The New Zealand Pharmacy Education and Research Foundation

The New Zealand Pharmacy Education and Research Foundation is a related party as the Society can appoint three members of the six-member Foundation Board and appoint Trustees and determine the duration and conditions of appointments.

The Society provides the Foundation with administration and financial services for a fee. In 2019 the fee for services provided was \$23,907 (2018: \$22,899).

The Society collects donations on behalf of the Trustees via its website. Donations collected but not passed on to the Foundation at 31 December 2019 totaled \$90 (31 December 2018: \$2,093).

#### Key management personnel

Key management personnel as defined by PBE IPSAS 20 *Related Party Disclosures* fall into two groups:

- National Executive, and
- Senior management group comprising the Chief Executive; General Manager, Corporate and Member Services; Manager, Practice and Policy; Manager, ENHANCE Professional Development Programme; Manager, EVOLVE Intern Training Programme; and Manager, College Education and Training.

The Society made related party payments to, and earned related party receipts from, certain parties, including partners or employees of National Executive-related entities. Payments included consulting fees. Receipts included membership subscriptions and training courses and events. All payments and receipts to all parties were made at arm's length commercial terms and conditions.

The aggregate remuneration of key management personnel is as follows:

	31 December 2019	31 December 2018
National Executive	\$84,737	\$92,651
Number of positions	10	7
Senior management group	\$827,018	\$798,871
Number of people	6	6

### 14 Branches and Associations

The Society has provided grants to the branches and associations and honoraria to Branch Presidents for the year to 31 December 2019 of \$22,200 (31 December 2018: \$17,443) to fund their activities during that period. The Society paid for various Branch Presidents to attend National Executive meetings during 2019 with a cost of \$3,874 (2018: \$3,714).

The activities of the branches have not been incorporated in the results of the Society.

### 15 Capital commitments

The Society has capital commitments of nil as at 31 December 2019 (31 December 2018: nil).

### 16 Contingencies

The Society has tax losses of \$789,173 (31 December 2018: \$789,173) that were accumulated prior to its registration under the Charities Act 2005 in June 2008, and which are still available if required. These arose because the Society's deductible expenses were greater than its assessable income up until the date of registration. Tax losses are not recognised as future tax benefits unless realisation of the asset is virtually certain. As the Society is not subject to income tax, the future tax benefit is not recognised as a tax loss because it is unlikely to be utilised, and accordingly the Society does not have a tax expense for the current period (31 December 2018: nil).

There are no other contingent assets or contingent liabilities as at 31 December 2019 (31 December 2018: nil).

### 17 Events subsequent to balance date

There are no events subsequent to balance date that would materially affect these financial statements.

# Independent Auditor's Report

To the members of Pharmaceutical Society of New Zealand Incorporated

## Report on the audit of the financial statements

### Opinion

In our opinion, the accompanying financial statements of Pharmaceutical Society of New Zealand Incorporated (the 'incorporated society') on pages 45 to 52:

- i. present fairly in all material respects the incorporated society's financial position as at 31 December 2019 and its financial performance and cash flows for the year ended on that date; and
- ii. comply with Public Benefit Entity Standards Reduced Disclosure Regime (Not For Profit).

We have audited the accompanying financial statements which comprise:

- the statement of financial position as at 31 December 2019;
- the statements of comprehensive revenue and expense, movements in equity and cash flows for the year then ended; and
- notes, including a summary of significant accounting policies and other explanatory information.

### Basis for opinion

We conducted our audit in accordance with International Standards on Auditing (New Zealand) ('ISAs (NZ)'). We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

We are independent of the incorporated society in accordance with Professional and Ethical Standard 1 (Revised) Code of Ethics for Assurance Practitioners issued by the New Zealand Auditing and Assurance Standards Board and the International Ethics Standards Board for Accountants' Code of Ethics for Professional Accountants ('IESBA Code'), and we have fulfilled our other ethical responsibilities in accordance with these requirements and the IESBA Code.

Our responsibilities under ISAs (NZ) are further described in the auditor's responsibilities for the audit of the financial statements section of our report.

Other than in our capacity as auditor we have no relationship with, or interests in, the incorporated society.

### Other information

The National Executive, on behalf of the incorporated society, are responsible for the other information included in the entity's Annual Report. Our opinion on the financial statements does not cover any other information and we do not express any form of assurance conclusion thereon.

In connection with our audit of the financial statements our responsibility is to read the other information and, in doing so, consider whether the other information is materially inconsistent with the financial statements or our knowledge obtained in the audit or otherwise appears materially misstated. If, based on the work we have performed, we conclude that there is a material misstatement of this other information, we are required to report that fact. We have nothing to report in this regard.

### Use of this independent auditor's report

This independent auditor's report is made solely to the members as a body. Our audit work has been undertaken so that we might state to the members those matters we are required to state to them in the independent auditor's report and for no other purpose. To the fullest extent permitted by law, we do not accept or assume responsibility to anyone other than the members as a body for our audit work, this independent auditor's report, or any of the opinions we have formed.

### Responsibilities of the National Executive for the financial statements

The National Executive, on behalf of the incorporated society, are responsible for:

- the preparation and fair presentation of the financial statements in accordance with generally accepted accounting practice in New Zealand (being Public Benefit Entity Standards Reduced Disclosure Regime (Not For Profit));
- implementing necessary internal control to enable the preparation of a set of financial statements that is fairly presented and free from material misstatement, whether due to fraud or error; and
- assessing the ability to continue as a going concern. This includes disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless they either intend to liquidate or to cease operations, or have no realistic alternative but to do so.

### Auditor's responsibilities for the audit of the financial statements

Our objective is:

- to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error; and
- to issue an independent auditor's report that includes our opinion.

Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with ISAs NZ will always detect a material misstatement when it exists.

Misstatements can arise from fraud or error. They are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of these financial statements.

A further description of our responsibilities for the audit of these financial statements is located at the External Reporting Board (XRB) website at:

<http://www.xrb.govt.nz/standards-for-assurance-practitioners/auditors-responsibilities/audit-report-8/>

This description forms part of our independent auditor's report.

KPMG  
Wellington

12 June 2020



**PHARMACEUTICAL SOCIETY**  
*of New Zealand Incorporated*