NEWSLETTER – July 2026

INTRO FROM CHAIR AND CE

Kia ora koutou

It seems like the last few months have been full of momentum for the Pharmacy Council, with a new Chair and Deputy Chair, new Council members, and getting the results of our discussion document, performance review, financial audit, and regulatory pathways consultation.

There is a lot of work underway, which has set us up well for the second half of the year to make progress while still fulfilling all the requirements of a regulator. We will likely have some further consultations for the sector, including a consultation on APC fees. At this stage no decisions have been made on the likely budget requirement and therefore the required cost-recovery APC fee going forward yet. We are working hard to manage every dollar effectively, but notifications keep increasing which means a corresponding increase in costs. We will be going out to consult on fees later in the year.

Pharmacy Council was recently reviewed by the Ministry of Health, who are responsible for independent performance reviews of all responsible authorities every five years. This was a great opportunity to see how much we have achieved since 2021, and although we are still waiting on the final report, initial indications show that we have fully achieved all our core performance standards.

Winter always sees pharmacies full of patients with seasonal ailments, and we hope that you managed a break over the Matariki period to rest and recharge.

Ngā mihi
John Roberts (Chair) and Michael Pead (Chief Executive)

IMPORTANT FOR YOU TO KNOW

JOHN ROBERTS ELECTED AS CHAIR, PLUS THREE NEW COUNCIL MEMBERS

Pharmacy Council Members June 2026

John Roberts was elected as the new Pharmacy Council Chair in the June Council meeting, with Ben Oldfield elected as Deputy Chair.

Appointed to the Pharmacy Council as a lay member in August 2025, John brings a wealth of governance experience to the role of Chair.

"I joined the Pharmacy Council primarily to contribute to the safety and well-being of New Zealanders. The pharmacy sector is primed for change to align with the government's target of 'the right care at the right time' and I believe that my governance, strategic and collaborative skills will help the regulator and the sector achieve these outcomes," says John.

John will be supported by Deputy Chair Ben Oldfield. Also appointed to the Pharmacy Council in August 2025, Ben is a New Zealand registered pharmacist and currently works as Head Pharmacist for New Zealand Clinical Research.

"The public need to know that any pharmacist they see, wherever they are in the country, is practising safely. Contributing to that is a privilege," says Ben. "I've seen pharmacy from several angles: leading a clinical research team working to international standards, and rural community pharmacy in Northland. That breadth gives me a strong sense of both what the profession is capable of and where the public is relying on us to get it right."

The June Council meeting was the first for the three new members recently appointed by the Associate Minister of Health. The three new members are:

- **Di Vicary** – a pharmacist with over 30 years' experience in community pharmacy, clinical management, training, policy and service development, and research.
- **Lisa Burns** – a lay member with a background in senior leadership within health and social sector organisations, including Dove Hospice & Wellness and Cystic Fibrosis NZ.
- **Vicky Chan** – a pharmacy leader and governance professional with more than 20 years' experience across clinical pharmacy, primary care development, workforce leadership, and health equity in New Zealand.

For a full list of Council member bios, see the Pharmacy Council website.

REGISTRATION PATHWAY CONSULTATION RESULTS

In March, the Pharmacy Council consulted on proposed changes to the registration pathways for New Zealand pharmacists, specifically amendments to the *Pharmacy Council Scopes of Practice and Prescribed Qualifications Amendments Notice 2014* (the Gazette notice). We sought feedback from members of the pharmacy profession, employers, professional bodies, regulators, and other interested stakeholders.

We acknowledge and thank everyone who took the time to make a submission. The feedback received was detailed, constructive, and reflected strong engagement with the regulatory framework underpinning pharmacist registration. You can find a full summary of the responses on our Consultations page.

We presented the findings to the Council members in June, who approved the following actions:

For Recognised Equivalent Qualifications Route (REQR) pharmacists, we will:

- Change the name to Comparable Pathway
- Broaden eligibility based on registration in comparable jurisdictions rather than place of qualification
- Remove the CAOP requirement

Council will also:

- Remove the mandatory requirement for all pharmacists returning to practice after eight or more years to complete the ITP and pass Assessment Centre. Instead, applications will be reviewed on a case-by-case basis to ensure the return to practice conditions/requirements are proportionate.
- Update the gazette to remove reference to the Trans-Tasman Mutual Recognition Act 1997 and clarify the prescribed qualifications for UK pharmacist prescribers.

Much of this work will need to be gazetted into secondary legislation, and then we will need to implement the changes with updates to our IT system, forms, policies, guidance and communications. While some changes may take effect immediately after gazetting (such as the removal of the CAOP exam), others may not be in place until the end of 2026.

At this stage, the sole change to the non-Recognised Equivalent Qualifications Route (non-REQR) will be:

- Changing the name to non-Comparable Pathway

As there was mixed feedback on options to fast-track the non-REQR pathway by allowing the NZ Pharmacy Legislation to be completed in the ITP, we will not make this change at this stage. This will be considered again when the pathway is next reviewed.

In the consultation, we also asked for feedback on the option of further increasing the pool of eligible pharmacists for the REQR route, including assessing other jurisdictions for comparability.

There was reasonable support for increasing the number of jurisdictions we deem "comparable", but this will require significant work so is unlikely to get underway until late 2026.

Another option for consideration was enabling faster and more affordable registration for some non-REQR pharmacists, by potentially removing the requirement to complete the intern training programme. There was limited support for this option, so the pathway will be reviewed again later in the year.

REVIEW COMPLETED ON PRIVACY ERROR

In late March, we advised affected practitioners that the work address provided on the most recent Annual Practising Certificate (APC) application was temporarily visible on the Pharmacy Council's online public register from the time that APC was approved.

At the time, we also advised that we were undertaking a review of the incident to find out exactly what went wrong and how to strengthen safeguards to prevent a similar incident in the future. We have completed that review and would like to share the findings.

Although the review concluded that the risk of harm occurring from the error was low, we acknowledge that people have experienced concerns and distress because of this error and apologise unreservedly that it occurred.

There has been speculation that the data breach occurred because of an external threat or hack – this is incorrect. The information was mistakenly published due to an internal error in the software development and there was no third-party involvement at any stage.

What happened

- Between 25 February and 30 March 2026, a technical issue with the Pharmacy Council's website resulted in some workplace addresses being visible on the online public register.
- This occurred because a system change applied for the 2026/2027 APC year introduced a defect in the system used to process APC applications.
- This defect affected a specific area of functionality that caused all work addresses to be published, even for those practitioners who opted not to make this information public.
- No other personal or financial information, identity documents, email addresses, or account login details were involved.
- Once identified, the issue was addressed and all work address details were removed from Council's website.
- We notified the Ministry of Health and the Minister's office, the Office of the Privacy Commissioner (OPC), and all affected practitioners, and started a review into the incident.

Review findings

The review found the error occurred because a version upgrade to the scripting language we use caused the output from a line of code to incorrectly interpret a 'no' as a 'yes'. When the error was identified, the location and remediation of the problem was prompt, indicating the error was a highly localised single issue. It was quickly understood, permanently fixed, and not indicative of a wider systemic failure.

The information was mistakenly published due to an internal error in the software development and there was no third-party involvement at any stage.

The structure of the public website means that it is not possible to identify how many, or which, addresses were accessed when the information was available. However, any ill-intentioned access during that time would have been highly opportunistic and, based on information received to date, is considered unlikely.

User acceptance testing should have identified this as a high severity error and stopped the deployment immediately.

The review determined there are lessons and changes we can make to prevent such errors. We can improve our processes when making changes to the system, including user testing. We can enhance our checks and balances and ensure up-to-date team training before the system is deployed active. The steps we are taking are outlined in the section below.

Our Council Finance Assurance and Risk Management Committee has extensively reviewed the incident report and agrees with the next step actions. The Committee has asked to be kept informed and will ensure the actions are completed as expected.

While the review investigated what happened and determined the required actions, we have also taken the opportunity to look at our entire IT infrastructure to reaffirm it is still fit for purpose and secure. Our Finance and Assurance and Risk Management Committee has met with our IT providers and remains convinced that the system does meet this criterion. While no system is infallible, security will always be a priority, and Council is investing appropriately. We are confident we have the right system for our level of organisation and the sensitive information we maintain.

Response from the Office of the Privacy Commissioner (OPC)

On 22 April we received confirmation that the OPC is satisfied with the information provided by the Pharmacy Council and have closed the matter.

Next steps

Council has committed to, and is now implementing, the following next steps:

- Share the results of the review with all affected practitioners
- Remove all work addresses from the public register, and maintain only the public information required by legislation
- Engage an independent party to review our testing processes and propose necessary changes to these as required
- Review our policies and procedures, including sign-off processes, and provide team training on privacy requirements and technology updates and testing

If you would like to discuss your circumstances or have specific safety concerns, please contact the Chief Executive (m.pead@pharmacycouncil.org.nz). We want you to feel assured that your personal information is secure in the Pharmacy Council system, so please get in touch if you would like more information about anything identified in the review.

Once again, the whole Pharmacy Council team would like to reiterate our apologies that this error occurred and our commitment to protecting your information.

OUR ENGAGEMENT JOURNEY

DISCUSSION DOCUMENT RESULTS

Thank you for to everyone who made a submission to the Pharmacy Council's discussion document on advancing future pharmacy practices through regulation. We appreciate the time and effort that went into the submissions and have considered all the responses.

Results

The responses for:

- **Topic 1: Statement on innovative practice** showed general support for the statement, with a clear requirement for operational guidelines.
- **Topic 2: Registration pathways** showed broad agreement that workforce shortages are primarily due to poor retention, low pay, and burnout, rather than regulatory barriers, and that easing pathways won't fix the core problem.
- **Topic 3: Expanded roles via scope endorsements** showed deeply divided responses about introducing scope endorsements. There was agreement that the problem must be clearly defined before any further work is done in this area.
- **Topic 4: Prescribing** showed strong support for expanding pharmacist prescribing, if done safely and supported by robust training, governance, and information access. Funding was repeatedly identified as a major barrier to uptake.
- **Topic 5: Regulating technicians and PACTs** showed strong support in principle for regulation, however concerns about cost, workforce impact, and administrative burden are widespread. It was generally not seen as a high priority.

Other comments:

- Respondents expressed broad support for the Council's intent to advance regulation to keep pace with evolving pharmacy practice and enable pharmacists to work to their full scope.
- Some also noted their appreciation for the Council's work, tone, and direction, and saw the proposals as timely and positive.
- Several submitters stressed the interdependence of the five topics, and many prioritised registration pathways and prescribing as having the greatest potential to ease workforce pressure.
- A recurring theme was that regulatory reform cannot occur in isolation from funding and commissioning, workplace conditions, and health system infrastructure.

Next steps

As we acknowledged in the discussion document, the Pharmacy Council should be responsive to the needs of the sector, rather than a leader driving change. Our focus is on protecting the public by ensuring pharmacists are competent and fit to practice. We do this

by making sure that the regulatory tools we use are fair and proportionate, and by working closely with other organisations in the sector.

Professional expertise and advocacy must come from the professional organisations, and we encourage all pharmacists to join an organisation that best reflects their views and values. A coherent voice and strong vision from the sector will ensure that funders, policy makers, and the public have a clear understanding of the value that pharmacists bring to the health sector.

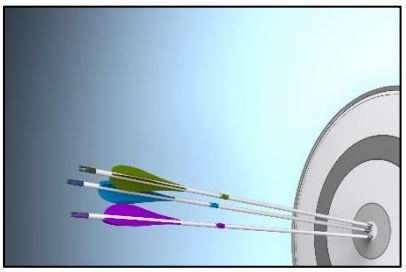
We acknowledge the work the Pharmacy Sector Leader's Forum is doing in this space and look forward to seeing the results. A clear vision helps us as regulator to know where to put the guardrails for safe practice, ensuring that the profession is effectively regulated while still able to grow and flourish.

Many of the submissions gave us information to build into our future work programme, but there was also a lot of useful material that falls outside the Pharmacy Council's remit. We have gathered this information to share with the sector.

We have divided the information into three documents:

1. Summary of all the responses
2. The next steps for the Pharmacy Council
3. Other comments and information

COUNCIL'S PERFORMANCE REVIEW



When the Health Practitioners Competence Assurance Act 2003 was amended in 2019, the amendment included a requirement for independent performance reviews of all responsible authorities.

These performance reviews provide assurance to the Crown and the public that responsible authorities are performing their functions efficiently and effectively. The review ensures that:

- the responsible authorities are carrying out their required functions in the interests of public safety
- their activities focus on protecting the public without being compromised by professional self-interest
- their overall performance supports high public confidence in the regulatory system

- the responsible authorities contribute to the overall functioning of the health system.

You can read more about the Ministry of Health's responsibilities here.

Pharmacy Council's review was conducted in June. We submitted a summary of the work we've completed since our last review in 2021 and welcomed the reviewers into the office for interviews with the team, Council members, and partners (including pharmacists).

Preparing for the review was a significant effort, but it also highlighted how much we have achieved. In the last five years, the Pharmacy Council has:

- strengthened and modernised our accreditation framework, bringing accreditation in-house, publishing new accreditation standards, establishing advisory and accreditation teams, and embedding annual monitoring.
- updated key competence standards, including stronger alignment with Te Tiriti o Waitangi, cultural safety, equity, and contemporary pharmacy practice.
- Improved registration and APC processes through online application pathways, clearer guidance, source verification, strengthened SOPs, and more efficient handling of higher application volumes.
- embedded a standards-based recertification programme, including portfolio reviews, practitioner guidance, and a planned post-implementation review.
- strengthened complaints, notifications, competence, fitness to practise, and health-related processes through structured triage, risk-based decision-making, delegated authority, case management, and clearer escalation pathways.
- progressed Te Tiriti, equity, and cultural safety work through its Governance Charter, Te Tiriti Advisory Group, accreditation standards, recertification requirements, and an external review of Māori and health equity systems.
- improved communications and public awareness, including clearer website information, newsletters, consultations, media responses, and increased transparency about regulatory priorities.
- demonstrated strong sector collaboration, including work with other responsible authorities, joint prescribing principles, interdisciplinary initiatives, and regular RA engagement.

We've identified areas that we need to work on in the future, particularly around business intelligence, impact measurement, reporting capability, resourcing, and assurance of equity and cultural safety outcomes.

We will share the full report on our website when it is released, but initial indications show that we have fully achieved all our core performance standards.

KEEPING YOU UP TO DATE

MESSAGE FROM MING-CHUN WU - PREVIOUS PHARMACY COUNCIL CHAIR

Tēnā koutou katoa,

Following the completion of my term on the Pharmacy Council, I wanted to take the opportunity to thank the pharmacy profession for the privilege of serving over the past six years, including as Chair.

It has been an extraordinary period for pharmacy and the wider health sector. During that time, I have seen firsthand the dedication, expertise, and care that pharmacists bring to communities across Aotearoa every day.

I remain firmly of the view that pharmacists have an even greater role to play in improving primary health outcomes, supporting equity, and strengthening the sustainability of our health system. While progress has at times felt slower than many would like, I believe the conversations now occurring across the sector about the future of pharmacy are important and necessary.

I am proud of the work the Council has undertaken to encourage more future-focused thinking about regulation, workforce pathways, innovation, and the evolving role of pharmacists within multidisciplinary care.

There is still much to do. The profession will continue to need strong leadership, greater alignment around a shared vision, and a willingness to think beyond immediate pressures toward the long-term opportunities ahead.

Thank you to everyone who engaged constructively with the Council during my tenure, whether through consultation, stakeholder discussions, professional practice, or simply through your ongoing commitment to serving patients and communities.

It has been a genuine privilege to serve the profession and the public in this role, and I wish you all the very best for the future.

Ngā mihi nui
Ming-chun Wu

MAY ASSESSMENT CENTRE RESULTS

Fifty-five intern pharmacists successfully passed the May Assessment Centre and are now eligible to register in the pharmacist scope of practice.

“Intern pharmacists work incredibly hard, using their years of learning to build practical, patient-focused skills during the intern programme,” said Michael Pead, Pharmacy Council Chief Executive.

“It is great to see some outstanding results from interns who simply needed a bit of extra time to consolidate their competencies and will now become fantastic pharmacists.”

The May Assessment Centre is for interns who did not complete the intern programme by the November 2025 Assessment Centre or who were unsuccessful at the November 2025 Assessment Centre. Both events maintain the same high standards required of candidates. To find out more about how and why we run the Assessment Centre, check out the article in our April newsletter.

The 55 successful interns can now apply to register in the pharmacist scope of practice, joining the 153 people who passed the November Assessment Centre and potentially adding over 200 new pharmacists to the workforce in the last seven months.

The pass rate for this Assessment Centre was 59%, with fewer participants and a lower pass rate than May 2025. Held in late May and delivered by the Pharmaceutical Society of New Zealand (PSNZ), the Assessment Centre is the final step towards registration for aspiring pharmacists after completing the intern training programme.

“This is a team effort, with the Pharmacy Council and PSNZ working together to develop each Assessment Centre, creating an assessment that mirrors the real-life clinical scenarios encountered in pharmacies across the country,” said Michael.

“Thanks also to all the pharmacists who contributed their expertise over the last couple of months in case writing, piloting, standard setting and assessment. A lot of time and effort goes into making sure each Assessment Centre is psychometrically robust and runs smoothly for the participants.”

eLEARNING MODULE – PREGNANCY AND ANTI-SEIZURE MEDICINES

The NZ College of Midwives and Health Quality & Safety Commission have published an eLearning module to support health professionals in the safe use of anti-seizure medicines in people who may become pregnant: Pregnancy and anti-seizure medicines: Balancing risks and potential harms.

The course is available free of charge, and supports the recently introduced foetal anti-convulsant syndrome (FACS) cautionary advisory label (CAL 19) that pharmacists have been asked to attach to all dispensings of the highest-risk antiseizure medicines regardless of indication.

HPDT DECISIONS

The Health Practitioners Disciplinary Tribunal (HPDT) holds disciplinary proceedings against health practitioners, including pharmacists, who are alleged to have breached standards of practice. Decisions involving pharmacists are provided to Council by the HPDT so that we can publish a summary of the case for learning purposes.

There have been three decisions released this year:

- Mr I, a pharmacist charged with falsely identifying himself to a Medsafe auditor twice and practising outside of his scope by dispensing medication whilst unsupervised.
- Ms N, a pharmacist charged with stealing medicines for personal use and supplying prescription medicine from the dispensary stock to a colleague without a prescription.
- Dr Al Gailani, a pharmacist charged with recklessly providing his personal bank account details on a Primary Options for Acute Care (POAC) form, resulting in payments being made to his personal account instead of to his employer for whom the payments were intended.

You can read the summaries on the Decisions of the Health Practitioners Disciplinary Tribunal page on our website.
