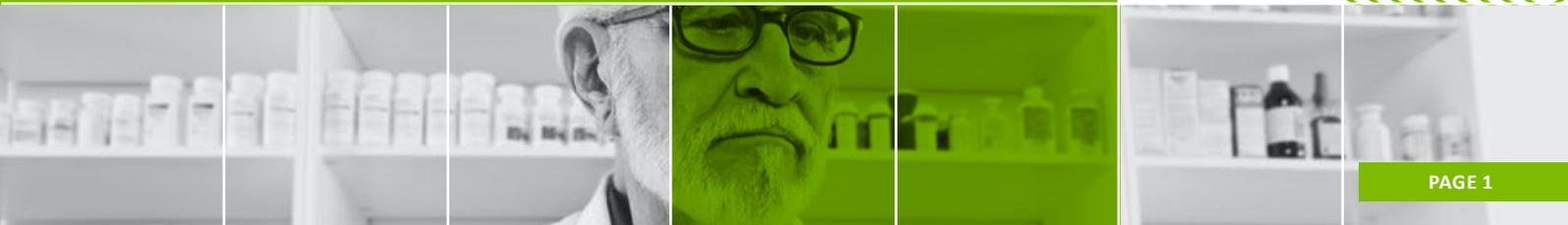




**Professional
Pharmacists
Australia**

COMMUNITY AND HOSPITAL PHARMACISTS EMPLOYMENT AND REMUNERATION REPORT

2019-20



ABOUT PROFESSIONAL PHARMACISTS AUSTRALIA

Professional Pharmacists Australia is the professional association and union for Pharmacists and Pharmacy Technicians. Our members work in pharmacies across Australia providing the life-saving medicines and expert advice that keep our world-class health system delivering for patients.

Professional Pharmacists Australia is a division of Professionals Australia (formerly the Association of Professionals Engineers, Scientists and Managers, Australia), an organisation registered under the Fair Work Act 2009 representing over 25,000 Pharmacists, Professional Engineers, Professional Scientists, Veterinarians, Architects, Information Technology Professionals, Managers, Transport Industry Professionals and Translating and Interpreting Professionals throughout Australia. Professionals Australia is the only industrial association representing the industrial and professional interests of these groups.

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INTRODUCTION

Welcome to the 2019-20 Professional Pharmacists Australia Community and Hospital Pharmacists Employment and Remuneration Report.

Pharmacists are the lynchpin of the modern healthcare system, ensuring not only reliable, safe provision of medicines, but also expert advice on their use in hospitals, institutions, and the community. As medicine use continues to provide more health benefits and extend quality of life, pharmacists' roles increase in importance and scope. These professionals sacrifice time with friends and family to be there for the community when they are needed most.

This annual remuneration survey is an important tool for you and your union to both understand and confirm the current situation you face in pharmacy practice throughout Australia.

It is important that current and comprehensive data on remuneration is available to ensure pharmacists are being paid what they are worth. This report provides an evidence base to assist pharmacists to negotiate salaries at review time. It is a reference point for those considering a job offer and can assist to make an informed judgement about whether it's time to move on to another role.

It is also vital that employers understand the value of attracting and retaining pharmacists. This includes properly recognising the skills and the investment employees have made obtaining graduate and post-graduate qualifications.

It is tempting to conclude that under the current pandemic conditions, we can do little to improve our pay and conditions. Nothing is further from the truth. Over the previous twelve months we have worked with our members to improve pay and conditions in a number of areas including in private hospital pharmacy groups and community pharmacy through negotiating enterprise agreements, as well as running industrial cases in the Fair Work Commission to improve pay and conditions in the Award which underpins pharmacy remuneration.

This report is a snapshot of pay rates for pharmacists across sectors, responsibility levels, and employer. The report presents:

- Hourly rates of pay or annual salaries for pharmacists.
- How rates of pay have changed over time.
- The hours worked by pharmacists.
- A detailed look at penalty rates in the industry.
- The employment intentions and general morale of pharmacists.

This is comprehensive, detailed, and independent research you won't find elsewhere.



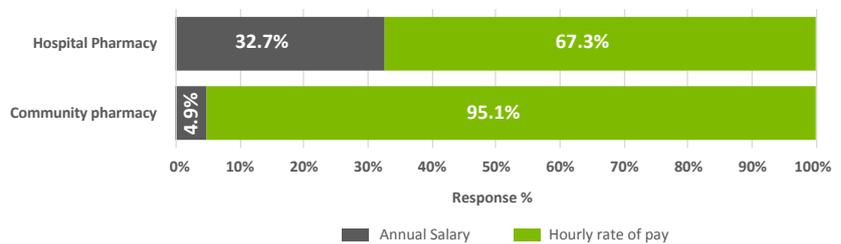
Dr Geoff March
President,
Professional Pharmacists Australia



RATES OF PAY

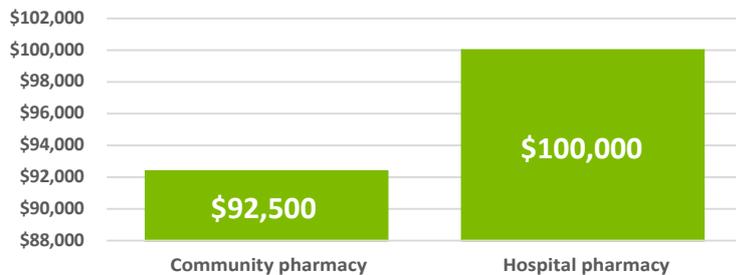
Pharmacy is dominated by the use of hourly wages instead of annual salaries to meet the wide range of hours and shifts pharmacists are required to work. Each arrangement provides its own benefits, but it is extremely rare for community pharmacists to have access to an annual salary arrangement, while a reasonable number of hospital pharmacists are employed by salary.

FIGURE 1 - PHARMACIST METHOD OF COMPENSATION BY INDUSTRY



Looking at both community pharmacists and hospital pharmacists as a whole, hospital pharmacists tended to be paid more whether employed under an annual salary arrangement or hourly wage arrangement. This is despite the distribution of respondents across pharmacist classifications trending towards lower levels of responsibility for hospital pharmacists and higher for community pharmacists.

FIGURE 2 - PHARMACIST MEDIAN ANNUAL SALARY BY INDUSTRY



Annual salary figures only include those that self-report working full-time.

FIGURE 3 - PHARMACIST MEDIAN HOURLY RATE OF PAY BY INDUSTRY



FIGURE 4 - COMMUNITY PHARMACIST DISTRIBUTION ACROSS CLASSIFICATIONS



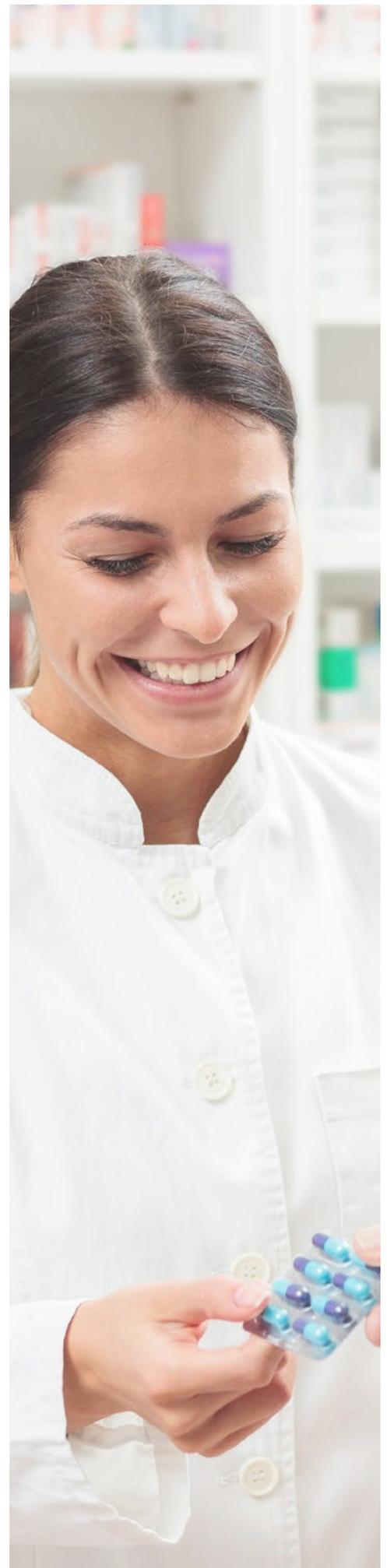
FIGURE 5 - HOSPITAL PHARMACIST DISTRIBUTION ACROSS CLASSIFICATIONS



COMMUNITY PHARMACIST PAY

Community pharmacy is notorious for flat pay progression. Being hired into roles of higher responsibility tends to lead to only a small increase in the rate of pay, if any at all. The exception is an increase to pharmacist pay when moving from the Pharmacy Intern classification to Pharmacist classification. Most Pharmacy Interns are paid very close to the Award rate and the noticeable jump in pay largely reflects moving into a classification where pay rates are normally above the Award Rate, which is already higher for Pharmacists compared to Interns.

FIGURE 6 - MEDIAN HOURLY RATE OF PAY FOR COMMUNITY PHARMACISTS PAID ON AN HOURLY BASIS BY CLASSIFICATION



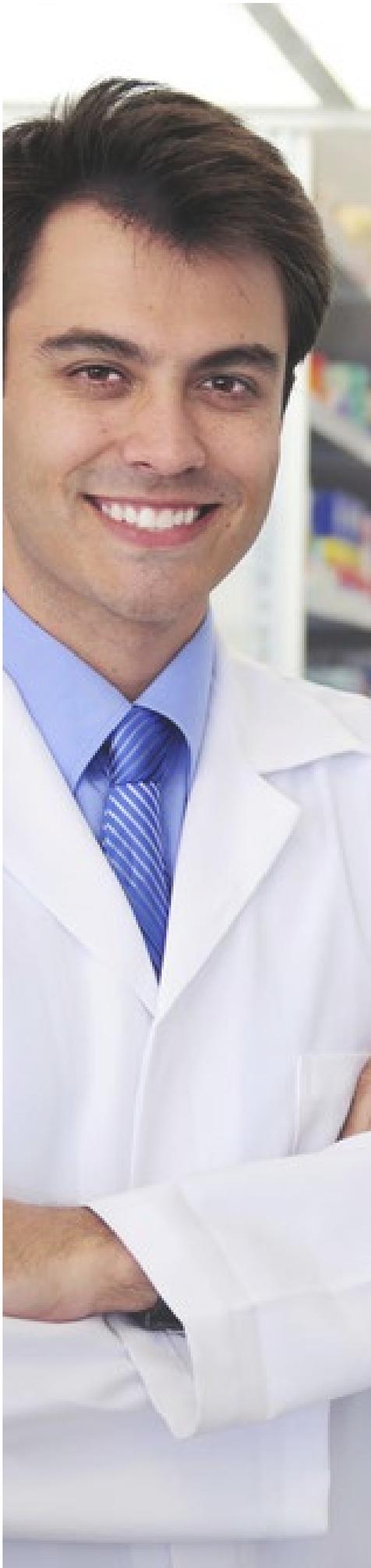


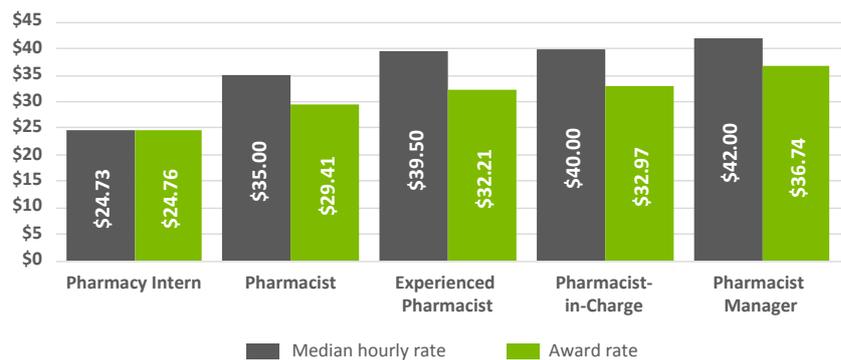
FIGURE 7 - COMMUNITY PHARMACIST MEDIAN ANNUAL SALARY BY CLASSIFICATION



Community pharmacist annual salaries are only reported for those employed at the Pharmacist-in-Charge classification or the Pharmacist Manager classification due to annual salaries being so uncommon for less responsible classifications.

Hourly rates of pay have been determined for all community pharmacists paid an annual salary based on their self-reported weekly hours and combined with those paid on an hourly basis for the purpose of comparing to the award rate for the industry. Award rates for community pharmacists are set by the Pharmacy Industry Award 2010.

FIGURE 8 - COMMUNITY PHARMACIST MEDIAN HOURLY EARNINGS BY CLASSIFICATION COMPARED TO THE AWARD RATE



Includes those paid on an hourly basis as well as those paid an annual salary, with that number adjusted for the number of hours they report working in an average week. The Pharmacy Intern award rate listed is for the second half of training.

HOSPITAL PHARMACIST PAY

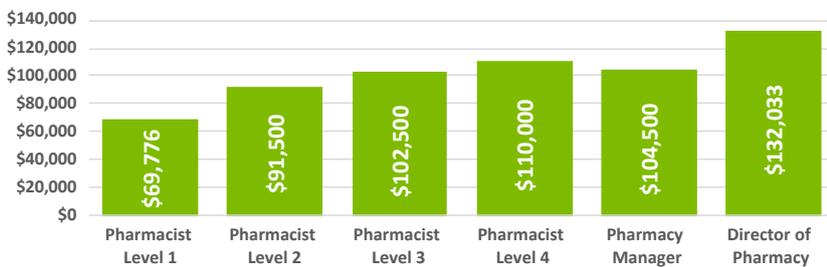
Hospital pharmacists can be covered by a different award to community pharmacists, depending on the employer. The Health Professionals and Support Services Award 2010 sets out classifications for hospital pharmacy using a level structure from level one to level four. These levels were used when asking hospital pharmacists to indicate their level of responsibility in the survey. Hospital pharmacists paid on an hourly basis tended to have step changes in their rates of pay, with a significant increase in pay when progressing from level one to level two, and from level three to level four. Respondents to the survey could choose to self-identify as a Pharmacy Manager, a role largely consistent with level four, but not defined by the award.

FIGURE 9 - HOSPITAL PHARMACIST MEDIAN HOURLY RATE OF PAY BY CLASSIFICATION



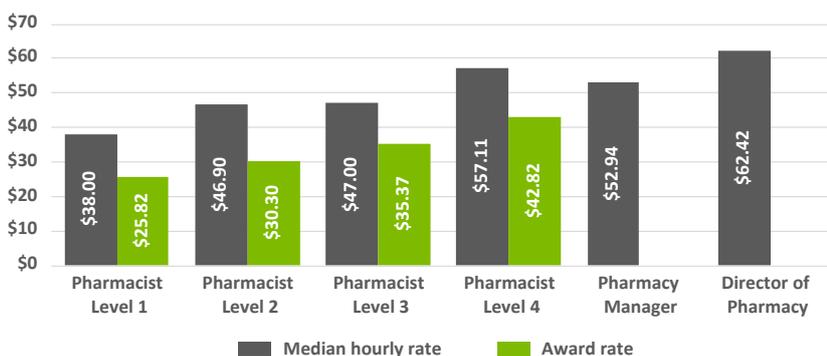
Pay rates increased in a steadier pattern across classifications for hospital pharmacists paid by annual salary. The median rate of pay was lower for Pharmacy Managers than those employed at level four. Those employed in a Director of Pharmacy role, which would likely exceed coverage by the award and for which no-one was employed on an hourly basis, were paid substantially more.

FIGURE 10 - HOSPITAL PHARMACIST MEDIAN ANNUAL SALARY BY CLASSIFICATION

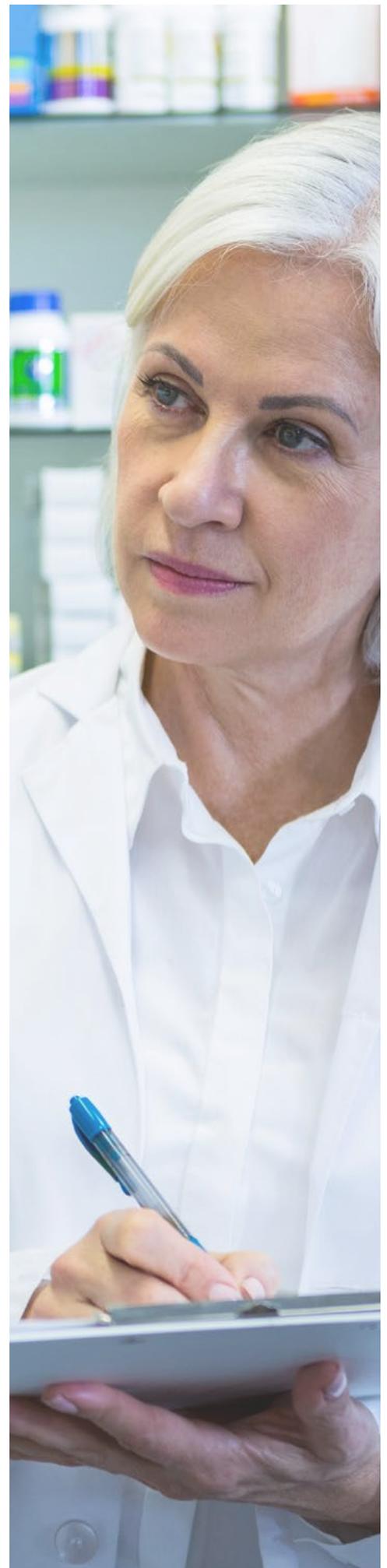


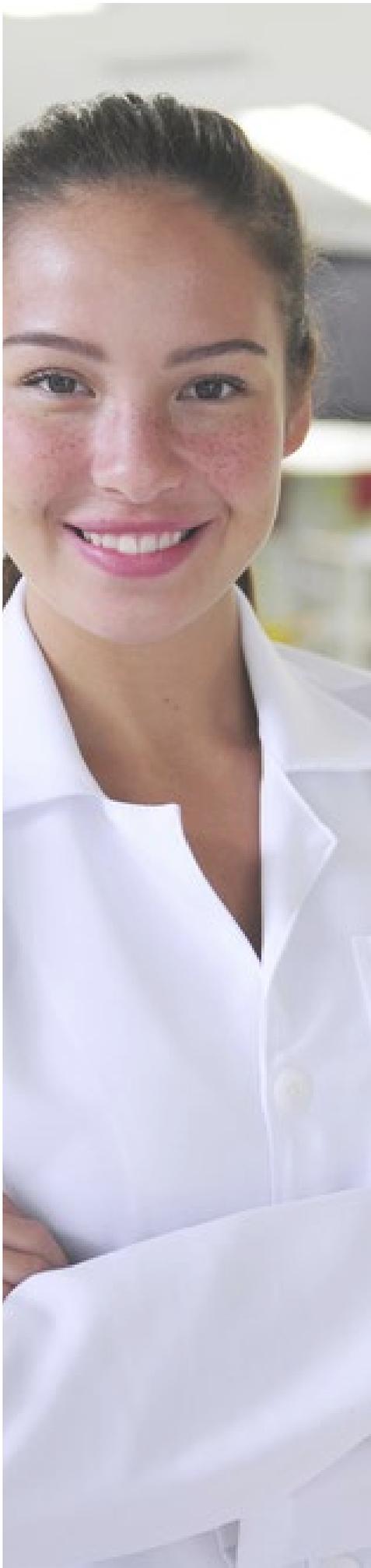
The divide between rates of pay in hospital pharmacy, and minimum rates of pay as specified by the Hospital Professionals and Support Services Award was substantially larger than it is for community pharmacy, where professionals are often only paid slightly more than the award rate.

FIGURE 11 - HOSPITAL PHARMACIST MEDIAN HOURLY EARNINGS BY CLASSIFICATION



Includes those paid on an hourly basis as well as those paid an annual salary, with that number adjusted for the number of hours they report working in an average week. The award rate presented is for pay point 1, except for level 1 where it is pay point 3 for those starting with a four-year degree.

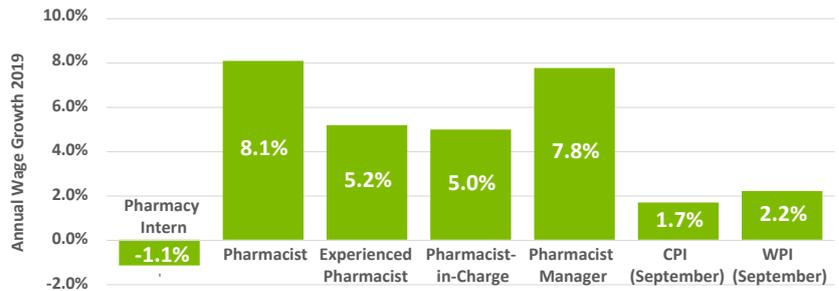




MOVEMENTS OVER THE LAST YEAR

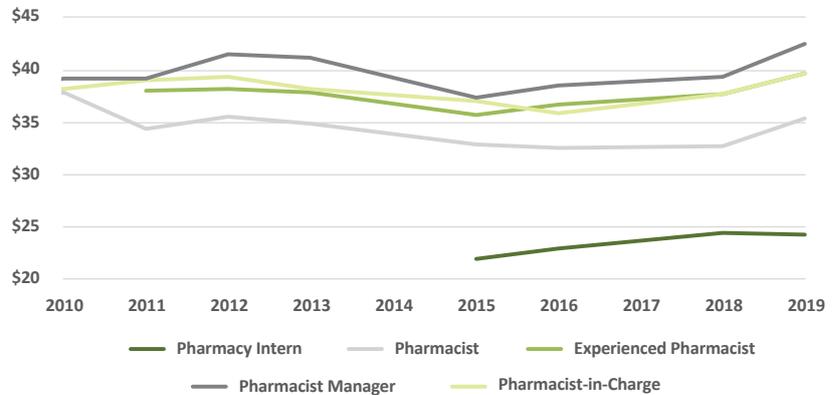
After years of mostly stagnant growth in wages community pharmacists have finally experienced some real pay increases. All classifications other than Pharmacy Intern reported higher mean hourly rates of pay compared to 2018, with the lowest growth being 5.0% for those employed at the Pharmacist-in-Charge classification. It is concerning that the Pharmacy Intern rate may be slowly declining when it is already so near the award minimum.

FIGURE 12 - COMMUNITY PHARMACIST SINGLE-YEAR WAGE GROWTH BY CLASSIFICATION



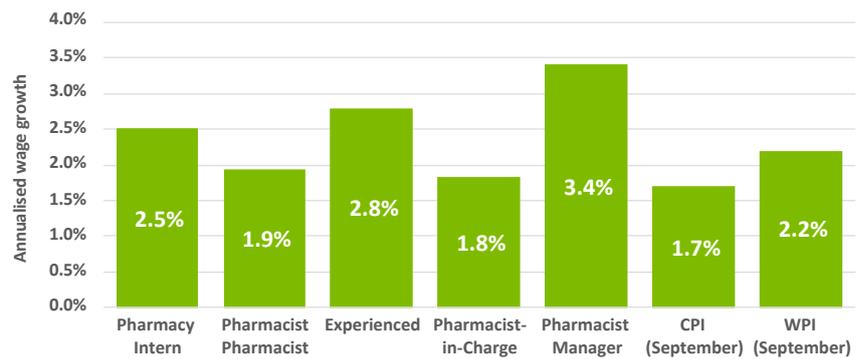
Most positively, the large increases experienced this year have recovered the much of the gradual decline in community pharmacist rates of pay that had been taking place since at least 2012. As a result, annualised wage growth across the previous four years for all community pharmacists is now positive indicating real wage growth from the trough that had developed 2015-2016 when Professionals Australia records for the Pharmacy Intern classification begin.

FIGURE 13 - COMMUNITY PHARMACIST MEAN HOURLY RATES 2010 - 2019



While things are much more positive for community pharmacists than they have been in previous years this is still a lot of room for improvement. Both the Pharmacist and Pharmacist-in-Charge classification mean hourly rates of pay have increased only barely ahead of CPI since 2015, limiting the impact this growth has on the disposable income of pharmacists nation-wide.

FIGURE 14 - COMMUNITY PHARMACIST ANNUALISED WAGE GROWTH 2015-2019 BY CLASSIFICATION



The new Pharmacy Industry Award was made in May 2020. The new Award includes the outcome of our work value case, cases improving provisions for part-time and casual workers, as well amended annualised salary provisions to name a few. Professional Pharmacists Australia took charge with many of the cases associated with this review to ensure no reductions in our members entitlements.

The annual Wage Review run by the ACTU on behalf of all unions including Professional Pharmacists Australia resulted in a 1.75% increase in wages. Health workers, including pharmacy employees received this increase from the 1st July 2020. A small but important step in combatting wage stagnation in the industry. Other groups of workers had to wait until November and even 2021 to gain access to this increase.

Professional Pharmacists Australia filed a case in the Fair Work Commission seeking unpaid pandemic leave for pharmacists and technicians to protect against unfair termination of employment for those required to isolate or quarantine because of COVID-19. This change was granted by the FWC and has subsequently been extended until the 29th of March 2021.

We also filed an application to achieve paid pandemic leave for employees covered by the Pharmacy Industry Award. Unfortunately, after many days hearings and significant evidence put by us including that of a leading epidemiologist, the Commission determined not to grant paid pandemic leave to pharmacy workers. Professional Pharmacists Australia continues to monitor this situation and if there is any significant change, we will apply gain to seek a reversal of the Commission's position.

Professional Pharmacists Australia is only able to do all this work to improve the working lives of pharmacists thanks to our strong base of members. Having an active and influential union gives pharmacists the collective power to create the positive change they deserve.

Join your peers and become a member today.

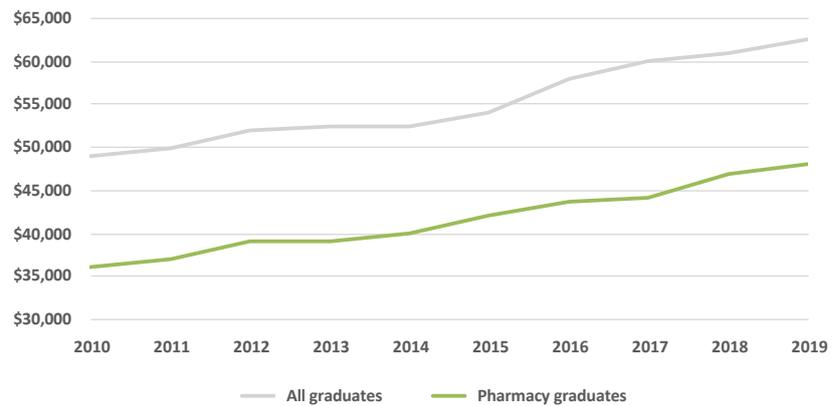
[CLICK HERE TO JOIN](#)



GRADUATE PAY

Growth in pay for pharmacists is great news but there is still a large divide to close. Graduate pharmacists continue to be some of the poorest paid graduates in Australia. The Graduate Outcomes Survey run by Quality Indicators for Learning and Teaching (QILT) provides an annual insight into the employment outcomes of recent graduates from most Australian Universities, including commencing rates of pay. For multiple years in a row the commencing rates of pay for pharmacists have been the lowest of any study area, and prior to 2018 by a large margin. In 2019 median pharmacist annualised commencing pay was \$48,000 per annum. The next lowest paid area of study was Tourism, hospitality, personal services, sport and recreation at \$50,000 per annum, which had to experience a strong decline from 2018 to even approach the commencing rate of pay for pharmacists.

FIGURE 15 - GRADUATE ANNUALISED COMMENCING RATES OF PAY, 2010 - 2019



Figures for 2016 till now taken from the QILT Graduate Outcomes Survey. Earlier years have been sourced from the GradStats report published by Graduate Careers Australia.

Looking at all graduates in 2019 the median annualised commencing rate of pay was \$62,600, \$14,600 higher than the commencing rate for pharmacists. For pharmacy graduates the only silver lining continues to be high rates of labour force participation, with 98.5% of graduates employed in 2019, one of the highest rates for any area of study in Australia.



GENDER

Despite women being the majority of the pharmacy workforce, the survey found a gender pay gap persists in community pharmacy.

Overall, the survey found a pay differential for pharmacists employed in community pharmacy with median hourly earnings (including those paid annual salary) of \$40.00 for male pharmacists, and \$38.00 for female pharmacists. The differential was smaller and reversed in hospital pharmacy where male respondents reported median hourly earnings of \$46.96 compared to \$47.50 for female pharmacists.

This represents a negative pay gap for women of 5.0% in community pharmacy but a figure closer to gender parity in hospital pharmacy where women earned 1.1% more than their male counterparts.

FIGURE 16 - PHARMACIST MEDIAN HOURLY EARNINGS BY INDUSTRY AND GENDER



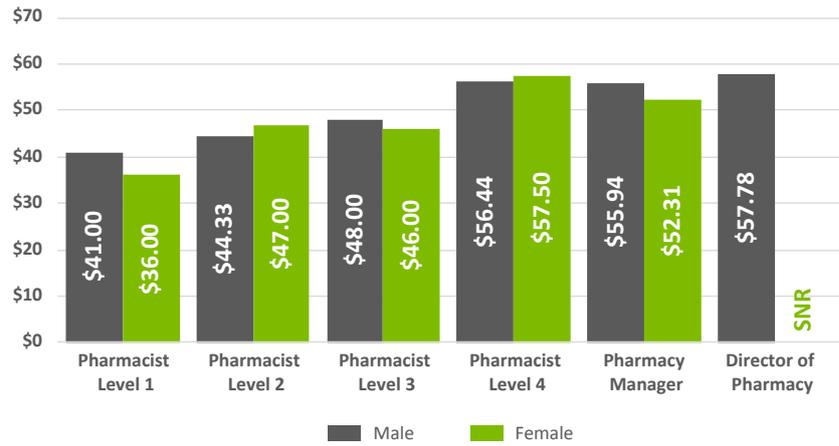
The survey found that while women in pharmacy were generally paid similar hourly rates as their male counterparts when considering like-for-like roles, the gender gap in community pharmacy arose as a result of the under-representation of women at the Pharmacy Manager classification and their over-representation in the Pharmacist classification. Women at the Pharmacy Manager classification also appeared to earn slightly less than their male counterparts reporting median hourly rates of pay of \$41.50 compared to \$42.74 per hour for male Pharmacy Managers.

FIGURE 17 - COMMUNITY PHARMACIST MEDIAN HOURLY EARNINGS ACROSS CLASSIFICATIONS BY GENDER



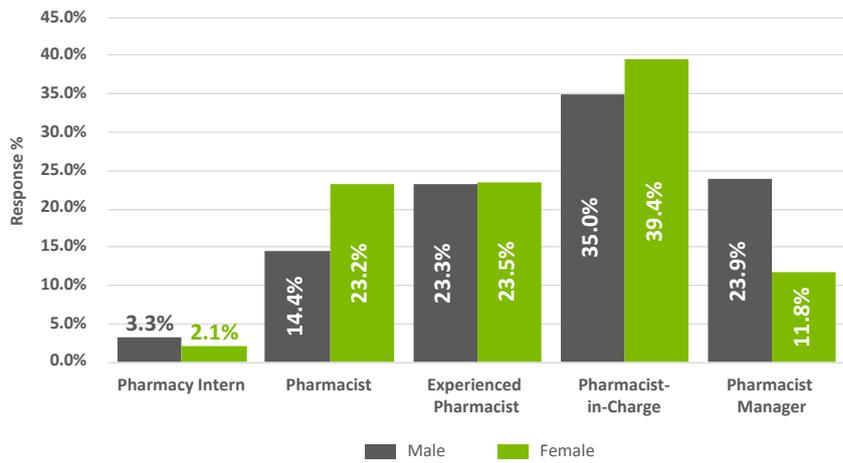


FIGURE 18 - HOSPITAL PHARMACIST MEDIAN HOURLY EARNINGS ACROSS CLASSIFICATIONS BY GENDER



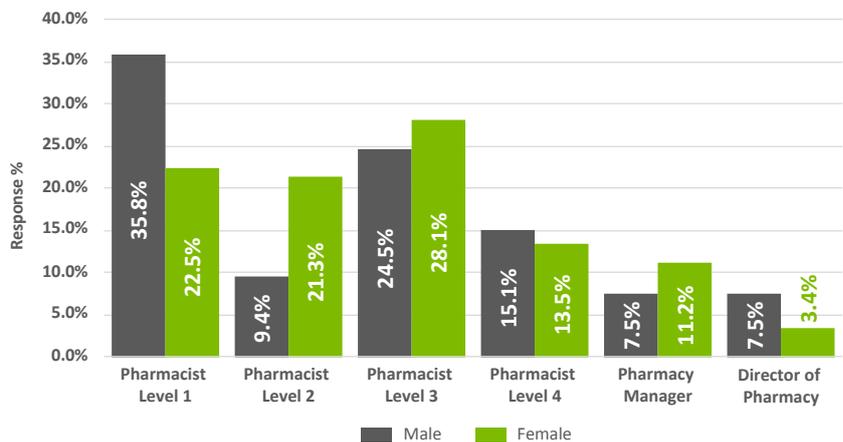
Only 11.8% of female respondents self-reported being employed at the Pharmacy Manager classification, compared to 23.9% of male respondents despite being the majority of the pharmacy workforce. At the same time, women in community pharmacy were much more likely to self-report being employed at the Pharmacist classification, the lowest classification outside of Interns – 23.2% of female respondents compared to 14.4% of male respondents.

FIGURE 19 - COMMUNITY PHARMACIST DISTRIBUTION ACROSS CLASSIFICATIONS BY GENDER



Representation issues were much harder to identify amongst Hospital Pharmacists, where the survey had a high respondency rate from males at Pharmacist Level 1.

FIGURE 20 - HOSPITAL PHARMACIST DISTRIBUTION ACROSS CLASSIFICATIONS BY GENDER





STATE

Pay for pharmacists varies by state. For community pharmacists pay tended to be better when working regionally rather than in a capital city or suburb. Like previous years, some of the best pay for community pharmacists was in Western Australian and Tasmania. By comparison, there was far less of a pattern for the pay of hospital pharmacists. If anything, it seems likely that variation in pay for hospital pharmacists by location relates far more to an individual employer's remuneration policies than regional demand for skills.

FIGURE 21 - COMMUNITY PHARMACIST MEDIAN HOURLY EARNINGS BY STATE

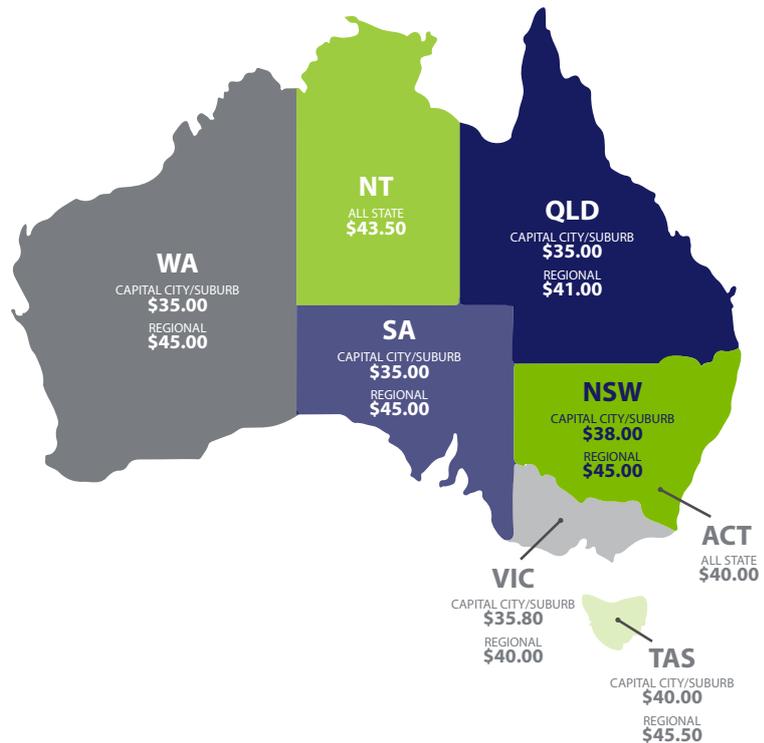
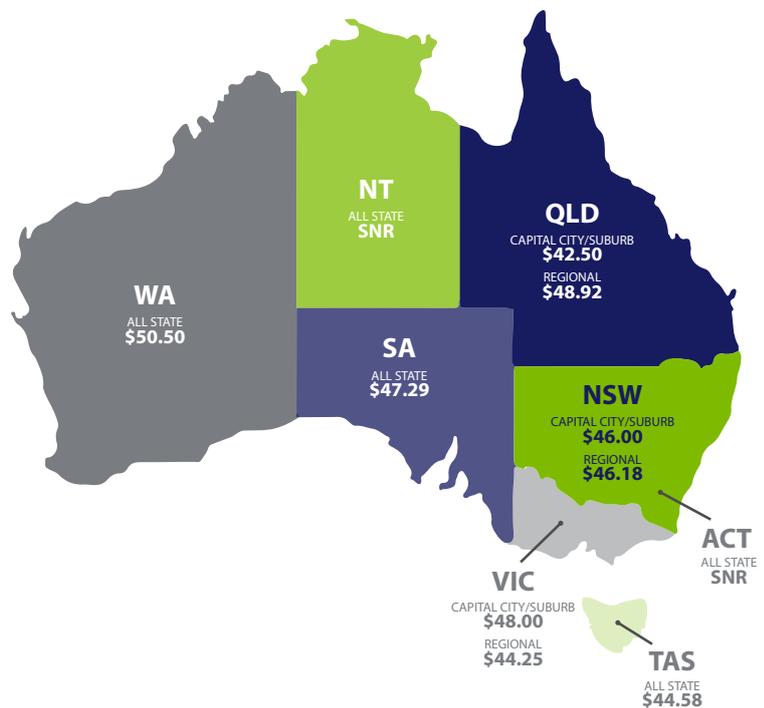


FIGURE 22 - HOSPITAL PHARMACIST MEDIAN HOURLY EARNINGS BY STATE





BANNER GROUP

A pharmacist's rates of pay are largely derived by which employer they work for. Within community pharmacy many pharmacy chains or banner groups intentionally pay on the lower end of the scale, much closer to the award rate. These discount chains tend to have a different business model to more traditional pharmacy banner groups. Instead of deriving a large portion of their profit from dispensing medicine, discount pharmacies use the dispensing of medicines as an opportunity to bring customers into store fronts where they can sell complimentary products, such as cosmetics and vitamins, which provide bigger margins.

Respondents to the survey that self-identified as working in community pharmacy were able to indicate which banner group they were employed by. Rates of pay for these banner groups are presented below categorised as either discount pharmacy or banner group pharmacy according to the following table:

| Discount Pharmacy | Banner Group Pharmacy |
|--|---|
| Chemist Warehouse Discount Drug Store My Chemist | Amcal/Amcal Max Blooms Chemplus Chempro Community Pharmacy Direct Guardian Pharmacy 4 Less Priceline Pharmacy Ramsay Soul Pattinson Terry White Chemmart National Pharmacies UFS All independent pharmacies Other banner groups |

The difference in hourly rates of pay between discount pharmacies and other banner groups was consistently between four to five dollars across all classifications in favour of banner group pharmacies. The exception was the Pharmacy Intern classification which is commonly paid at the award rate irrespective of employer. Lower median hourly rates of pay for pharmacists employed by discount pharmacies was largely driven by respondents working for Chemist Warehouse which has some of the least attractive pay conditions of any pharmacy chain in Australia. By comparison National Pharmacies, UFS and Amcal/Amcal Max had some of the best rates of pay across the board making them appealing employers for community pharmacists.

FIGURE 23 - COMMUNITY PHARMACIST MEDIAN HOURLY EARNINGS ACROSS CLASSIFICATIONS BY BANNER GROUP TYPE

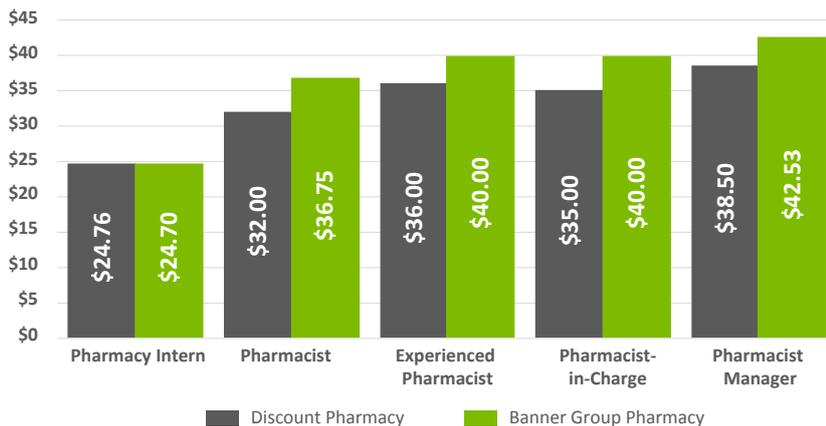


TABLE 1 - COMMUNITY PHARMACIST BASE HOURLY RATE OF PAY BY BANNER GROUP

| | | Base Hourly Rate | | | | |
|---------------------|---------------------------|------------------|----------------|---------|----------------|---------|
| | | N | Lower quartile | Median | Upper quartile | Mean |
| Amcal/Amcal Max | Pharmacy Intern | SNR | - | - | - | - |
| | Pharmacist | 3 | - | - | - | \$30.99 |
| | Experienced Pharmacist | 10 | \$38.50 | \$40.50 | \$42.00 | \$40.95 |
| | Pharmacist-in-Charge | 15 | \$38.00 | \$44.00 | \$45.00 | \$42.77 |
| | Pharmacist Manager | 7 | \$40.00 | \$42.33 | \$50.00 | \$44.33 |
| | All community pharmacists | 35 | \$38.00 | \$42.00 | \$45.00 | \$41.55 |
| Blooms | Pharmacy Intern | SNR | - | - | - | - |
| | Pharmacist | SNR | - | - | - | - |
| | Experienced Pharmacist | 3 | - | - | - | \$35.67 |
| | Pharmacist-in-Charge | 5 | \$40.00 | \$40.00 | \$42.00 | \$42.40 |
| | Pharmacist Manager | 3 | - | - | - | \$45.00 |
| | All community pharmacists | 12 | \$36.00 | \$40.00 | \$43.50 | \$41.17 |
| Chemist Warehouse | Pharmacy Intern | 5 | \$24.25 | \$24.76 | \$24.76 | \$24.34 |
| | Pharmacist | 20 | \$30.70 | \$32.00 | \$34.00 | \$32.11 |
| | Experienced Pharmacist | 16 | \$33.50 | \$35.50 | \$37.50 | \$36.03 |
| | Pharmacist-in-Charge | 15 | \$33.00 | \$35.00 | \$35.16 | \$35.41 |
| | Pharmacist Manager | 10 | \$36.00 | \$38.25 | \$41.00 | \$39.11 |
| | All community pharmacists | 66 | \$32.00 | \$34.25 | \$36.00 | \$34.28 |
| Discount Drug Store | Pharmacy Intern | SNR | - | - | - | - |
| | Pharmacist | 4 | - | \$36.50 | - | \$35.43 |
| | Experienced Pharmacist | 4 | - | \$43.50 | - | \$42.50 |
| | Pharmacist-in-Charge | 5 | \$40.00 | \$40.00 | \$45.00 | \$41.60 |
| | Pharmacist Manager | SNR | - | - | - | - |
| | All community pharmacists | 15 | \$38.00 | \$40.00 | \$45.00 | \$40.71 |
| Guardian | Pharmacy Intern | SNR | - | - | - | - |
| | Pharmacist | 3 | - | - | - | \$36.00 |
| | Experienced Pharmacist | SNR | - | - | - | - |
| | Pharmacist-in-Charge | 6 | \$37.00 | \$39.00 | \$45.00 | \$39.40 |
| | Pharmacist Manager | SNR | - | - | - | - |
| | All community pharmacists | 13 | \$38.00 | \$40.00 | \$45.00 | \$40.34 |
| Priceline Pharmacy | Pharmacy Intern | SNR | - | - | - | - |
| | Pharmacist | 10 | \$29.00 | \$36.50 | \$40.00 | \$35.44 |
| | Experienced Pharmacist | 15 | \$38.00 | \$40.00 | \$45.00 | \$40.82 |
| | Pharmacist-in-Charge | 22 | \$35.00 | \$40.00 | \$45.00 | \$39.44 |
| | Pharmacist Manager | 9 | \$36.00 | \$38.46 | \$40.00 | \$40.16 |
| | All community pharmacists | 56 | \$35.00 | \$40.00 | \$42.50 | \$39.21 |

TABLE 1 - COMMUNITY PHARMACIST BASE HOURLY RATE OF PAY BY BANNER GROUP (CONTINUED)

| | | Base Hourly Rate | | | | |
|-----------------------|---------------------------|------------------|----------------|---------|----------------|---------|
| | | N | Lower quartile | Median | Upper quartile | Mean |
| Terry White Chemmart | Pharmacy Intern | SNR | - | - | - | - |
| | Pharmacist | 12 | \$30.00 | \$33.50 | \$39.00 | \$34.43 |
| | Experienced Pharmacist | 14 | \$35.00 | \$37.00 | \$40.00 | \$37.64 |
| | Pharmacist-in-Charge | 20 | \$36.50 | \$40.00 | \$43.50 | \$40.78 |
| | Pharmacist Manager | 8 | \$36.00 | \$38.00 | \$39.50 | \$38.86 |
| | All community pharmacists | 55 | \$35.00 | \$38.00 | \$40.00 | \$38.02 |
| National Pharmacies | Pharmacy Intern | SNR | - | - | - | - |
| | Pharmacist | 4 | - | \$39.40 | - | \$39.33 |
| | Experienced Pharmacist | 6 | \$41.00 | \$42.07 | \$43.00 | \$43.28 |
| | Pharmacist-in-Charge | 5 | \$44.94 | \$44.94 | \$49.00 | \$46.38 |
| | Pharmacist Manager | SNR | - | - | - | - |
| | All community pharmacists | 16 | \$41.00 | \$43.50 | \$46.97 | \$43.99 |
| UFS | Pharmacy Intern | SNR | - | - | - | - |
| | Pharmacist | SNR | - | - | - | - |
| | Experienced Pharmacist | 8 | \$37.50 | \$40.14 | \$42.30 | \$39.36 |
| | Pharmacist-in-Charge | SNR | - | - | - | - |
| | Pharmacist Manager | 4 | - | \$48.33 | - | \$48.05 |
| | All community pharmacists | 15 | \$37.00 | \$41.00 | \$45.55 | \$41.32 |
| Independent Pharmacy | Pharmacy Intern | SNR | - | - | - | - |
| | Pharmacist | 20 | \$32.00 | \$37.25 | \$39.50 | \$35.87 |
| | Experienced Pharmacist | 30 | \$38.00 | \$40.50 | \$45.00 | \$42.95 |
| | Pharmacist-in-Charge | 62 | \$36.00 | \$40.00 | \$45.00 | \$40.90 |
| | Pharmacist Manager | 22 | \$40.00 | \$43.37 | \$45.00 | \$43.07 |
| | All community pharmacists | 135 | \$36.00 | \$40.00 | \$45.00 | \$40.84 |
| Discount Pharmacy | Pharmacy Intern | 5 | \$24.25 | \$24.76 | \$24.76 | \$24.34 |
| | Pharmacist | 24 | \$30.70 | \$32.00 | \$35.00 | \$32.66 |
| | Experienced Pharmacist | 20 | \$34.00 | \$36.00 | \$39.50 | \$36.97 |
| | Pharmacist-in-Charge | 20 | \$33.00 | \$35.00 | \$38.50 | \$36.57 |
| | Pharmacist Manager | 13 | \$36.00 | \$38.50 | \$45.00 | \$39.84 |
| | All community pharmacists | 82 | \$32.00 | \$35.00 | \$38.00 | \$35.30 |
| Banner Group Pharmacy | Pharmacy Intern | 7 | \$23.94 | \$24.70 | \$24.76 | \$24.13 |
| | Pharmacist | 69 | \$32.00 | \$36.75 | \$40.00 | \$36.38 |
| | Experienced Pharmacist | 90 | \$37.00 | \$40.00 | \$42.00 | \$40.29 |
| | Pharmacist-in-Charge | 158 | \$36.00 | \$40.00 | \$44.00 | \$40.04 |
| | Pharmacist Manager | 64 | \$39.50 | \$42.53 | \$46.41 | \$42.93 |
| | All community pharmacists | 388 | \$35.00 | \$40.00 | \$43.00 | \$39.64 |

Results are presented for any banner group with ten or more respondents.



PENALTY RATES

Pharmacists are commonly required to work times of day that are considered unsociable, such as late nights and weekends. As a result, penalty rates are commonly available at those times of day to compensate for the negative impact working those times can have on their personal lives. Excluding those paid an annual salary, access to penalty loadings was more common in hospital pharmacy than in community pharmacy, but still more common in community pharmacy than a single hourly flat rate of pay irrespective of the time of day worked. This is despite working unsociable hours being more common in community pharmacy than in hospital pharmacy.

FIGURE 24 - PHARMACIST METHOD OF COMPENSATION FOR WORK DURING UNSOCIABLE HOURS BY INDUSTRY

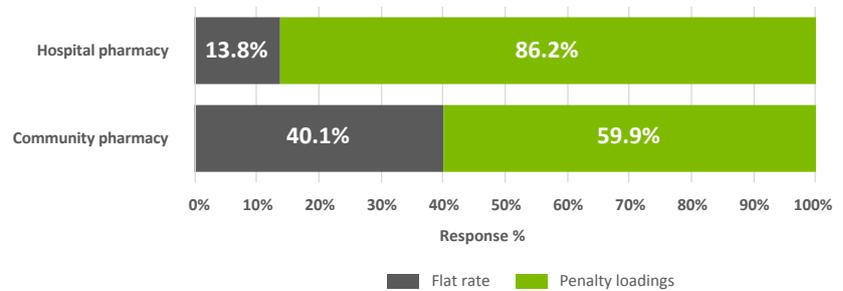
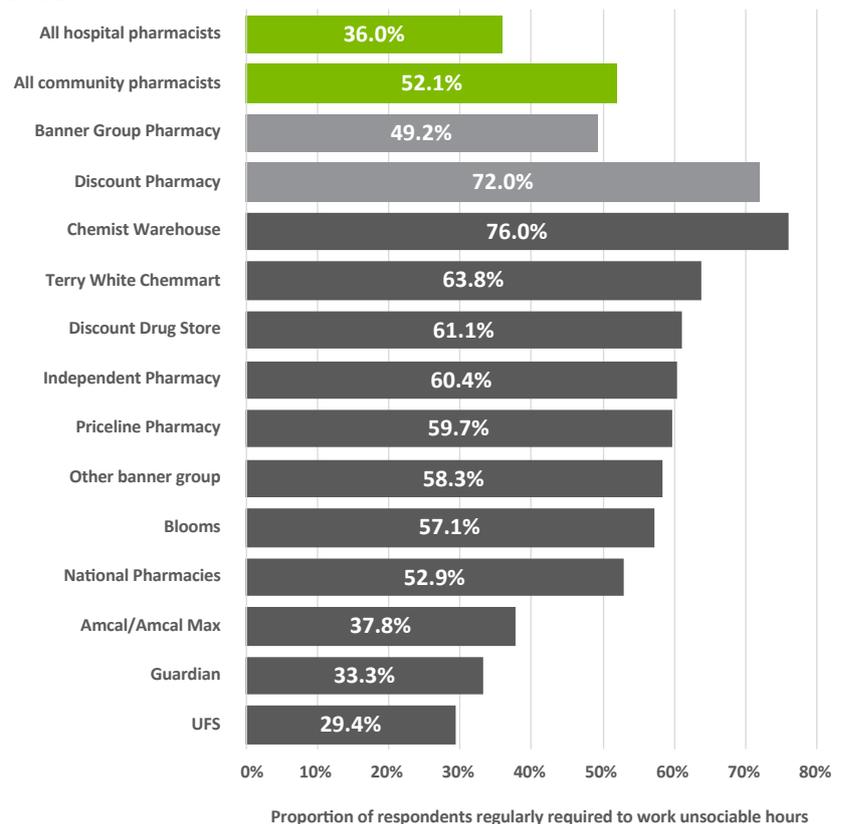


FIGURE 25 - PREVALENCE OF WORKING UNSOCIABLE HOURS BY BANNER GROUP



Not only are hospital pharmacists more likely to have access to penalty loadings than community pharmacists, they also tended to have access to better loadings delivering higher premiums for working outside of sociable hours. The only time of day where the average community pharmacist had access to better loadings was on a weekday before 8am, although the difference in the mean value of the loading as a percentage of the base rate of pay was minimal.

When you consider the overall better rate of pay in hospital pharmacy combined with the on average greater loadings available for working during unsociable hours, hospital pharmacists did much better than community pharmacists overall on an hourly basis making it a much more appealing stream of pharmacy to be employed in. Unsurprisingly, when asked whether they felt disadvantaged having to work weekends and unsociable hours, hospital pharmacists were far less likely to feel disadvantaged at 33.9%, compared with 52.7% of community pharmacists.

FIGURE 26 - MEAN PHARMACIST PENALTY LOADINGS ACROSS TIME OF DAY BY INDUSTRY

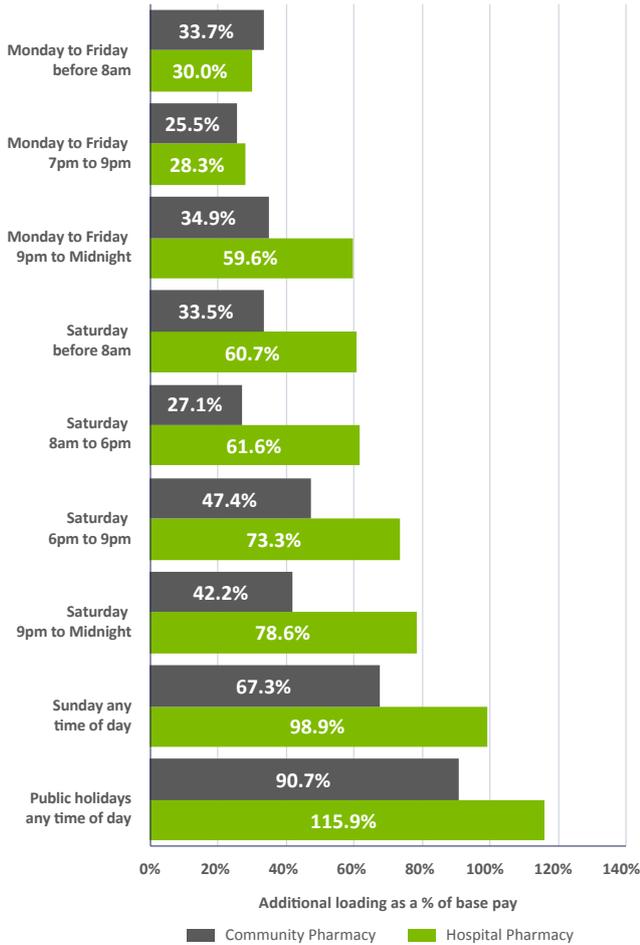


FIGURE 27 - MEDIAN PHARMACIST HOURLY RATES OF PAY WITH PENALTY LOADINGS APPLIED BY INDUSTRY

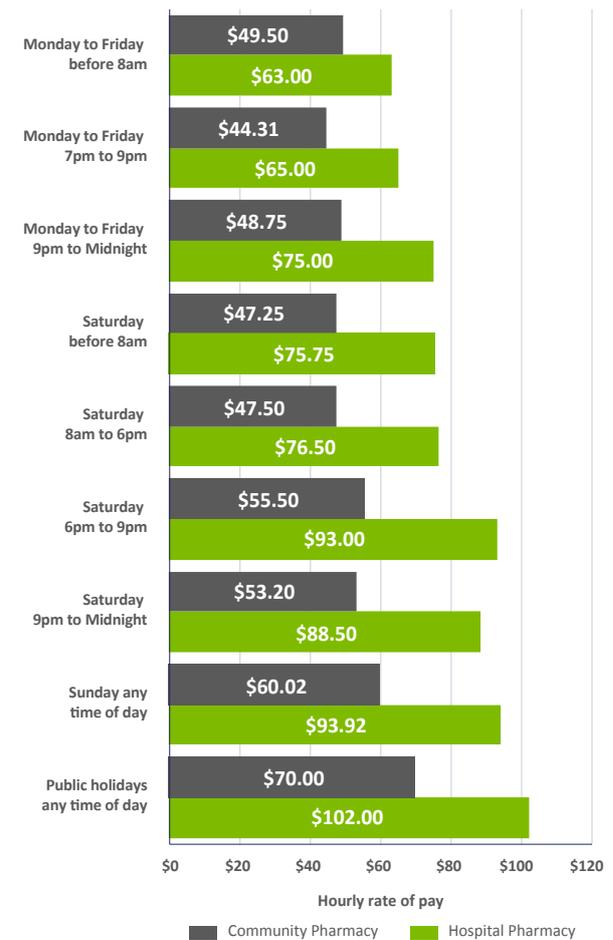


TABLE 2 - HOSPITAL PHARMACY HOURLY RATES OF PAY WITH PENALTY LOADINGS APPLIED BY CLASSIFICATION

| | | N | Lower quartile | Median | Upper quartile | Mean |
|--------------------|----------------------------------|-----|----------------|----------|----------------|----------|
| Pharmacist Level 1 | Public holidays any time of day | 8 | \$71.00 | \$84.25 | \$100.00 | \$85.99 |
| | Sunday any time of day | 10 | \$76.00 | \$80.50 | \$93.92 | \$82.89 |
| | Saturday 9pm to Midnight | 3 | - | - | - | \$84.31 |
| | Saturday 6pm to 9pm | 3 | - | - | - | \$84.31 |
| | Saturday 8am to 6pm | 10 | \$60.00 | \$66.75 | \$73.50 | \$66.36 |
| | Saturday before 8am | 3 | - | - | - | \$63.50 |
| | Monday to Friday 9pm to Midnight | 3 | - | - | - | \$79.61 |
| | Monday to Friday 7pm to 9pm | 3 | - | - | - | \$63.96 |
| | Monday to Friday before 8am | SNR | - | - | - | - |
| Pharmacist Level 2 | Public holidays any time of day | 10 | \$105.00 | \$113.91 | \$125.00 | \$115.11 |
| | Sunday any time of day | 10 | \$85.00 | \$91.13 | \$97.68 | \$91.34 |
| | Saturday 9pm to Midnight | SNR | - | - | - | - |
| | Saturday 6pm to 9pm | SNR | - | - | - | - |
| | Saturday 8am to 6pm | 10 | \$66.50 | \$74.13 | \$80.49 | \$73.33 |
| | Saturday before 8am | SNR | - | - | - | - |
| | Monday to Friday 9pm to Midnight | 3 | - | - | - | \$77.00 |
| | Monday to Friday 7pm to 9pm | 3 | - | - | - | \$60.00 |
| | Monday to Friday before 8am | 3 | - | - | - | \$68.50 |
| Pharmacist Level 3 | Public holidays any time of day | 14 | \$86.00 | \$99.88 | \$111.66 | \$98.40 |
| | Sunday any time of day | 14 | \$84.00 | \$93.57 | \$104.00 | \$93.62 |
| | Saturday 9pm to Midnight | 4 | - | \$92.00 | - | \$90.42 |
| | Saturday 6pm to 9pm | 5 | \$66.00 | \$100.00 | \$108.00 | \$89.73 |
| | Saturday 8am to 6pm | 12 | \$68.00 | \$77.25 | \$92.28 | \$81.34 |
| | Saturday before 8am | 5 | \$66.00 | \$75.00 | \$84.00 | \$75.15 |
| | Monday to Friday 9pm to Midnight | SNR | - | - | - | - |
| | Monday to Friday 7pm to 9pm | 4 | - | \$70.00 | - | \$65.03 |
| | Monday to Friday before 8am | 3 | - | - | - | \$59.03 |
| Pharmacist Level 4 | Public holidays any time of day | 5 | \$116.00 | \$120.00 | \$124.00 | \$123.86 |
| | Sunday any time of day | 7 | \$104.00 | \$116.00 | \$127.20 | \$118.95 |
| | Saturday 9pm to Midnight | 3 | - | - | - | \$97.67 |
| | Saturday 6pm to 9pm | 3 | - | - | - | \$97.67 |
| | Saturday 8am to 6pm | 7 | \$87.00 | \$93.00 | \$96.00 | \$95.51 |
| | Saturday before 8am | 3 | - | - | - | \$87.33 |
| | Monday to Friday 9pm to Midnight | 3 | - | - | - | \$87.33 |
| | Monday to Friday 7pm to 9pm | 3 | - | - | - | \$70.67 |
| | Monday to Friday before 8am | SNR | - | - | - | - |

TABLE 3 - COMMUNITY PHARMACY HOURLY RATES OF PAY WITH PENALTY LOADINGS APPLIED BY CLASSIFICATION

| | | N | Lower quartile | Median | Upper quartile | Mean |
|------------------------|----------------------------------|-----|----------------|---------|----------------|---------|
| Pharmacist | Public holidays any time of day | 16 | \$59.93 | \$65.01 | \$72.00 | \$63.91 |
| | Sunday any time of day | 20 | \$50.94 | \$56.30 | \$60.01 | \$56.42 |
| | Saturday 9pm to Midnight | SNR | - | - | - | - |
| | Saturday 6pm to 9pm | 5 | \$33.00 | \$43.02 | \$50.01 | \$44.50 |
| | Saturday 8am to 6pm | 26 | \$40.00 | \$45.00 | \$47.50 | \$43.59 |
| | Saturday before 8am | 5 | \$33.00 | \$35.00 | \$40.00 | \$38.90 |
| | Monday to Friday 9pm to Midnight | 6 | \$33.00 | \$42.50 | \$48.00 | \$41.00 |
| | Monday to Friday 7pm to 9pm | 13 | \$37.00 | \$42.50 | \$47.50 | \$42.39 |
| | Monday to Friday before 8am | 7 | \$33.00 | \$42.00 | \$51.00 | \$42.20 |
| Experienced Pharmacist | Public holidays any time of day | 25 | \$65.02 | \$70.01 | \$83.25 | \$75.46 |
| | Sunday any time of day | 36 | \$59.00 | \$66.00 | \$73.01 | \$66.66 |
| | Saturday 9pm to Midnight | 7 | \$48.75 | \$60.00 | \$82.00 | \$62.49 |
| | Saturday 6pm to 9pm | 10 | \$55.50 | \$62.25 | \$82.00 | \$67.29 |
| | Saturday 8am to 6pm | 32 | \$44.93 | \$49.99 | \$56.69 | \$51.29 |
| | Saturday before 8am | 4 | - | \$60.20 | - | \$59.60 |
| | Monday to Friday 9pm to Midnight | 13 | \$48.75 | \$54.75 | \$61.50 | \$54.72 |
| | Monday to Friday 7pm to 9pm | 26 | \$42.00 | \$46.25 | \$53.75 | \$48.84 |
| | Monday to Friday before 8am | 7 | \$38.00 | \$55.50 | \$60.41 | \$51.42 |
| Pharmacist-in-Charge | Public holidays any time of day | 31 | \$60.75 | \$72.00 | \$80.45 | \$72.88 |
| | Sunday any time of day | 48 | \$56.00 | \$60.00 | \$65.51 | \$63.46 |
| | Saturday 9pm to Midnight | 6 | \$38.00 | \$49.95 | \$56.00 | \$54.07 |
| | Saturday 6pm to 9pm | 10 | \$43.75 | \$49.75 | \$67.41 | \$56.56 |
| | Saturday 8am to 6pm | 52 | \$41.23 | \$45.00 | \$50.20 | \$47.30 |
| | Saturday before 8am | 7 | \$38.00 | \$43.75 | \$64.00 | \$49.04 |
| | Monday to Friday 9pm to Midnight | 8 | \$40.00 | \$44.38 | \$50.93 | \$47.08 |
| | Monday to Friday 7pm to 9pm | 24 | \$40.23 | \$42.25 | \$46.05 | \$46.68 |
| | Monday to Friday before 8am | 9 | \$41.00 | \$45.00 | \$52.50 | \$49.21 |
| Pharmacist Manager | Public holidays any time of day | 21 | \$66.00 | \$79.20 | \$95.00 | \$80.00 |
| | Sunday any time of day | 24 | \$59.92 | \$68.00 | \$77.99 | \$69.56 |
| | Saturday 9pm to Midnight | 4 | - | \$74.50 | - | \$74.58 |
| | Saturday 6pm to 9pm | 7 | \$51.25 | \$75.00 | \$94.00 | \$72.37 |
| | Saturday 8am to 6pm | 21 | \$49.98 | \$51.25 | \$60.00 | \$55.17 |
| | Saturday before 8am | 3 | - | - | - | \$70.50 |
| | Monday to Friday 9pm to Midnight | 3 | - | - | - | \$63.50 |
| | Monday to Friday 7pm to 9pm | 10 | \$44.63 | \$45.00 | \$51.25 | \$50.54 |
| | Monday to Friday before 8am | 8 | \$54.75 | \$58.50 | \$68.00 | \$60.31 |



The following graph compares hourly rates of pay for community pharmacists across classifications based on whether their contract entitles them to penalty rates. Pharmacists that are paid a flat rate earned more at all classifications than their peers earning penalty rates, but the premium tended to be no more than \$3 per hour. With such a low premium attached to earning a flat rate of pay community pharmacists that work hours that would typically attract penalty rates are likely to be better off receiving those penalty rates, even if they have to accept a slightly lower base hourly rate of pay.

FIGURE 28 - COMMUNITY PHARMACIST MEDIAN HOURLY EARNINGS ACROSS CLASSIFICATIONS BY PAYMENT TYPE





EMPLOYMENT CONDITIONS

Because community pharmacist and hospital pharmacist work can be underpinned by different awards it is common for the conditions each is employed under, and benefits they are entitled to, to be noticeably different. Even within each stream of pharmacy those conditions and benefits can vary drastically by employer. The matter is further complicated by some employers being less diligent at documenting the conditions their staff are subject to, and benefits they receive, using job descriptions, employment agreements, and enterprise agreements negotiated collectively.

Formal employment agreements were more common in hospital pharmacy than they are in community pharmacy, but still common in community pharmacy, with 80.0% of survey respondents indicating they had an employment agreement. Unfortunately, formal employment agreements were uncommon amongst a couple banner groups, most notably Discount Drug Store. By formalising the arrangement between employee and employer, employment agreements provide an important protection for staff and should be pushed for by anyone intending to work as a pharmacist.

FIGURE 29 - PREVALENCE OF EMPLOYMENT AGREEMENTS BY BANNER GROUP

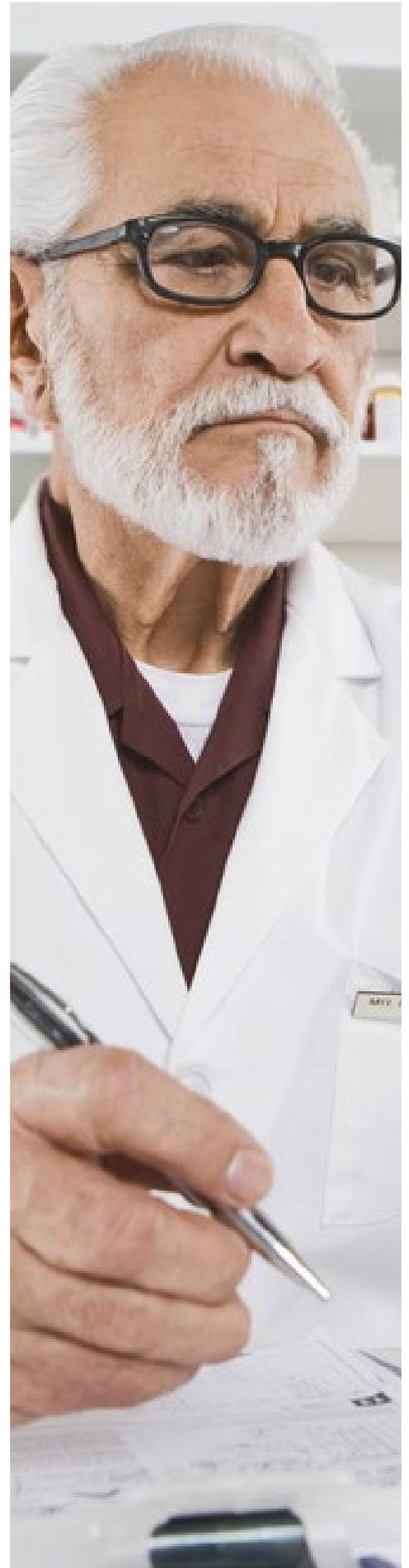
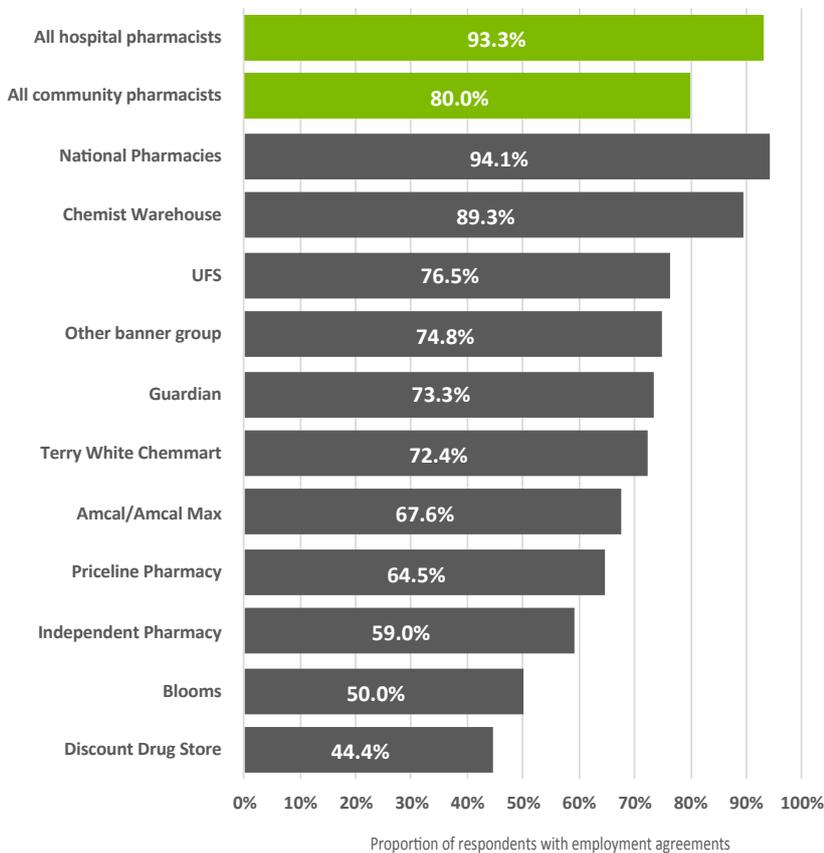
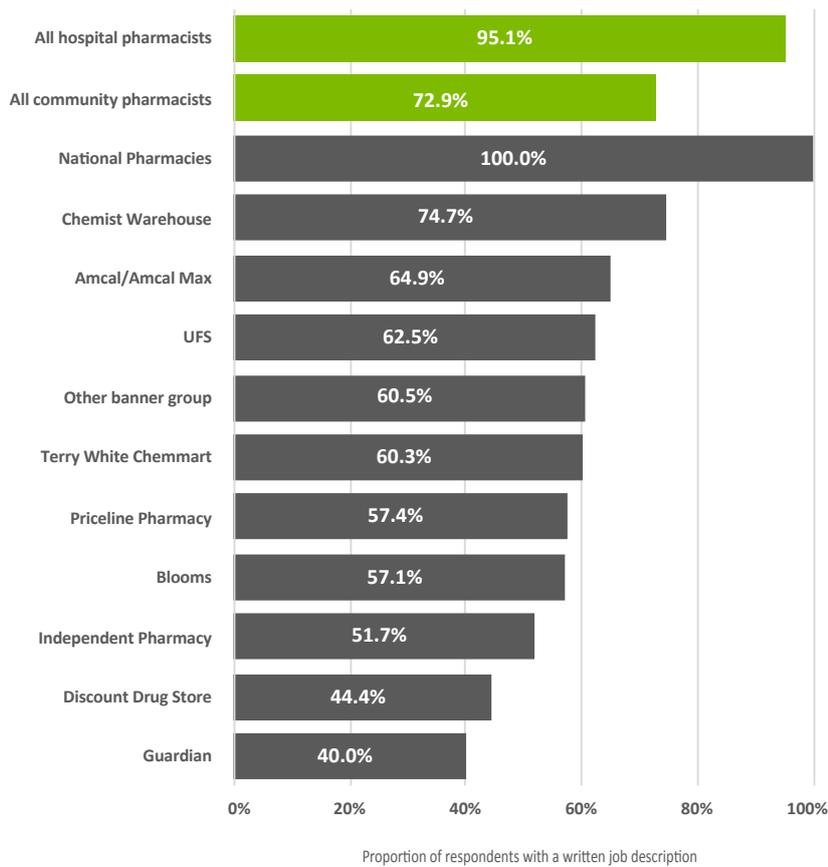


FIGURE 30 - PREVALENCE OF WRITTEN JOB DESCRIPTIONS BY BANNER GROUP



Job descriptions similarly provide protection for both employees and employers by specifying the responsibilities of staff. Like employment agreements, written job descriptions are more common in hospital pharmacy than community pharmacy, but still common in community pharmacy. Again, Discount Drug Store was one of the biggest offenders, with less than half of respondents working there reporting having written job descriptions. Guardian was even worse. Very positively, every pharmacist working for National Pharmacies that responded to the survey reported having a written job description. National Pharmacies also performed well when it came to the prevalence of employment agreements.

Enterprise agreements are negotiated collectively by an organisation's staff to set the rates of pay and employment conditions that apply in a workplace provide an effective way to equalise the power imbalance that typically exists between employer and employee. Enterprise agreements are more common in hospital pharmacy than in community pharmacy, where National Pharmacies is the only banner group to have an enterprise agreement. This enterprise agreement leads to pharmacists employed at National Pharmacies tending to earn a premium over pharmacists employed elsewhere in community pharmacy (refer to page 19).

Often people will believe they are covered by enterprise agreements when nothing has been negotiated. For banner groups with a low prevalence of enterprise agreements this is likely the case.

Over 75% of pharmacists at National Pharmacies are members of PPA and negotiate their wages and conditions of employment collectively through an enterprise agreement. Negotiating collectively, coupled with high union membership gives pharmacists power to improve their working lives.

It is that collective strength, and members' willingness to fight for a fair outcome (they took industrial action to stop cuts to their penalty rates!) which has resulted in them being the highest paid community pharmacists.

But it is not just about better wages, or fighting to hold on to penalty rates, it's also about having the power to improve conditions of employment. In the most recent round of bargaining management were not keen to repeat their previous mistakes which resulted in pharmacists taking industrial action, so were much more willing to negotiate a fair deal. Members negotiated additional payments for performing vaccinations, improved redundancy pay and family friendly provisions, as well as a process to review their classification structure.

If you are interested in how you can improve your pay and conditions, get in touch with Professional Pharmacists Australia to speak with one of our experts to discuss how.

Enterprise agreements and employment agreements tend to outline a range of benefits that an employee is entitled to. We asked respondents to indicate which from a list of the most common they had access. For hospital pharmacists paid parental leave provisions were the most common benefit, with 69.3% of respondents reporting access. Unfortunately, this benefit is much rarer in the community pharmacy sector, reported by only 27.7% of respondents. Hospital pharmacists were also more likely to have access to leave loading and on-call or standby payments. The only benefit community pharmacists were much more likely to have access to was pay for working through lunch breaks.

FIGURE 31 - PREVALENCE OF VARIOUS EMPLOYMENT BENEFITS BY EMPLOYER

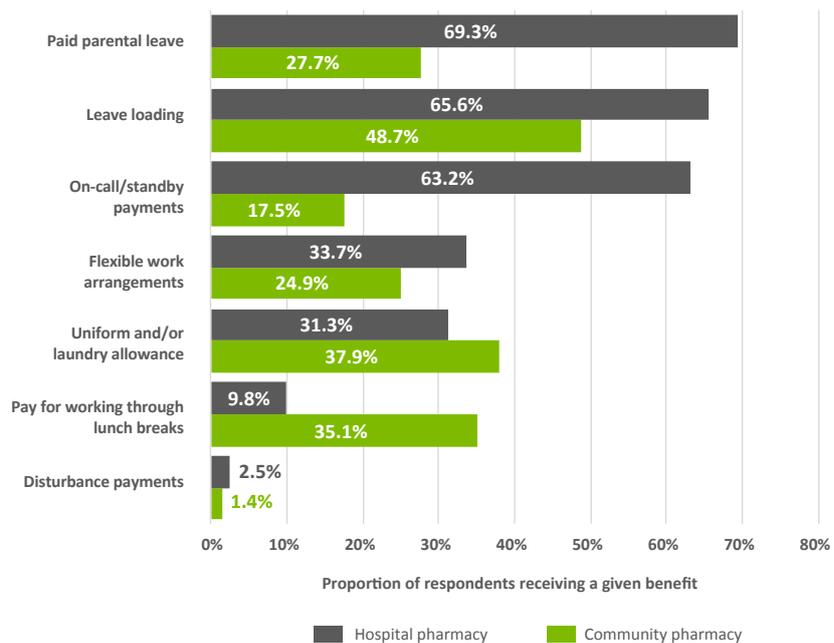


TABLE 4 - COMPARISON OF EMPLOYMENT BENEFITS BY PHARMACY EMPLOYER

| | | Benefit | | | | |
|---------------------------------|--|--------------------------|--------------------------------------|---------------|---------------------|----------------------------------|
| | | On-call/standby payments | Pay for working through lunch breaks | Leave loading | Paid parental leave | Uniform and/or laundry allowance |
| Community pharmacy banner group | Amcal/Amcal Max | Rare | Uncommon | Uncommon | Rare | Rare |
| | Blooms | Rare | Uncommon | Uncommon | Rare | Rare |
| | Chemist Warehouse | Rare | Uncommon | Common | Rare | Common |
| | Discount Drug Store | Rare | Uncommon | Rare | Rare | Rare |
| | Guardian | Rare | Uncommon | Uncommon | Rare | Rare |
| | Priceline Pharmacy | Rare | Uncommon | Uncommon | Rare | Uncommon |
| | Terry White Chemmart | Rare | Uncommon | Uncommon | Rare | Uncommon |
| | National Pharmacies | Rare | Common | Uncommon | Rare | Uncommon |
| | UFS | Rare | Uncommon | Uncommon | Rare | Uncommon |
| | Independent Pharmacy | Rare | Uncommon | Uncommon | Rare | Rare |
| Other banner group | Rare | Uncommon | Uncommon | Rare | Uncommon | |
| Overall banner group | Discount Pharmacy | Rare | Uncommon | Uncommon | Rare | Common |
| | Banner Group Pharmacy | Rare | Uncommon | Uncommon | Rare | Uncommon |
| Hospital pharmacy employer | Epic | Common | Rare | Common | Common | Uncommon |
| | HPS | Common | Rare | Rare | Common | Common |
| | Slade | Rare | Uncommon | Rare | Common | Common |
| | Employed directly by a public hospital | Common | Rare | Common | Common | Rare |
| | Other hospital pharmacy employer | Uncommon | Rare | Rare | Uncommon | Uncommon |

Community pharmacists were more likely to report regularly working through their lunch break than hospital pharmacists, but in both industries the prevalence of this was very employer-dependent. Within community pharmacy working through lunch breaks was particularly common at Guardian, Terry White, Blooms, and when working for independent pharmacies. In hospital pharmacy it was particularly common for Pharmacists working for Slade.

FIGURE 32 - COMMUNITY PHARMACIST PREVALENCE OF WORKING THROUGH LUNCH BREAKS BY BANNER GROUP

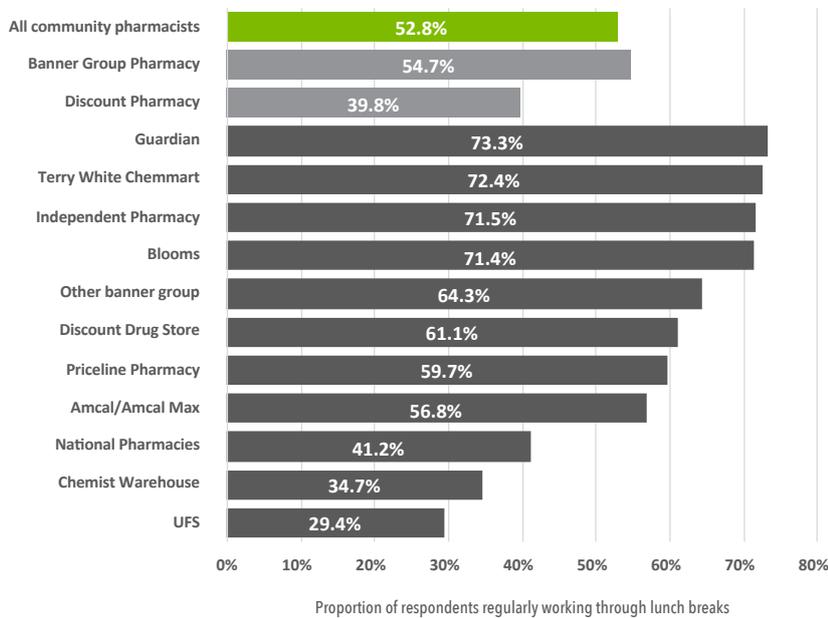
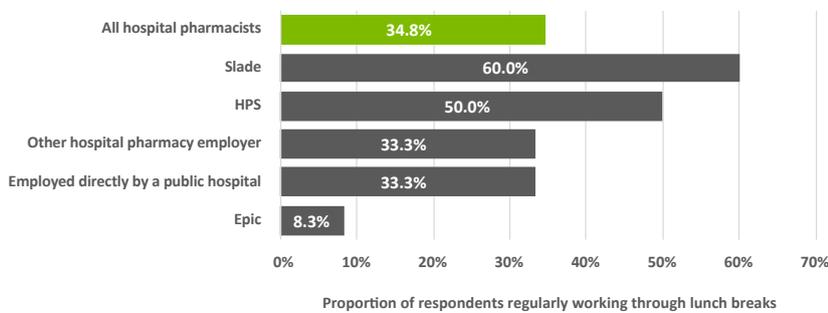
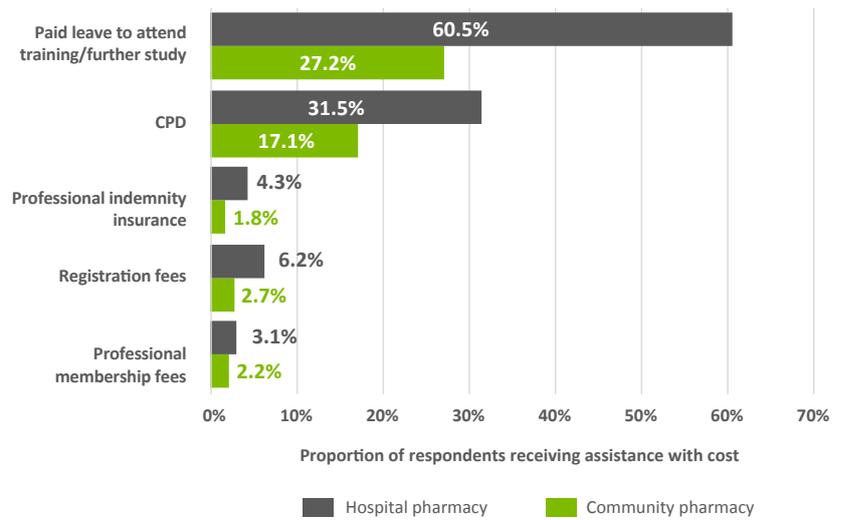


FIGURE 33 - HOSPITAL PHARMACIST PREVALENCE OF WORKING THROUGH LUNCH BREAKS BY EMPLOYER



A common benefit an employee might receive in a professional field is support for their ongoing professional costs. These are the costs an individual incurs maintaining their professional registration and staying up to date on within their field. Pharmacists have a number of these costs which they could receive assistance with. Hospital pharmacists were more likely than community pharmacists to receive assistance, largely in the form of paid leave to attend training or further study, but also with the costs associated with continuing professional development (CPD).

FIGURE 34 - PREVALENCE OF EMPLOYER SUPPORT FOR PROFESSIONAL COSTS



In addition to benefits, employment agreements and job descriptions can outline key performance indicators (KPIs) that employees are expected to achieve. Within pharmacy this can often mean KPIs based on filling a certain number of prescriptions within a given timeframe. Although this form of KPI is rare, it is more common in community pharmacy than in hospital pharmacy, and even more common at discount pharmacies. Within hospital pharmacy KPIs based on the number of prescriptions filled was most common amongst respondents employed by Slade, followed by those employed by Epic.

FIGURE 35 - COMMUNITY PHARMACIST PREVALENCE OF PRESCRIPTION BASED KPIS BY BANNER GROUP

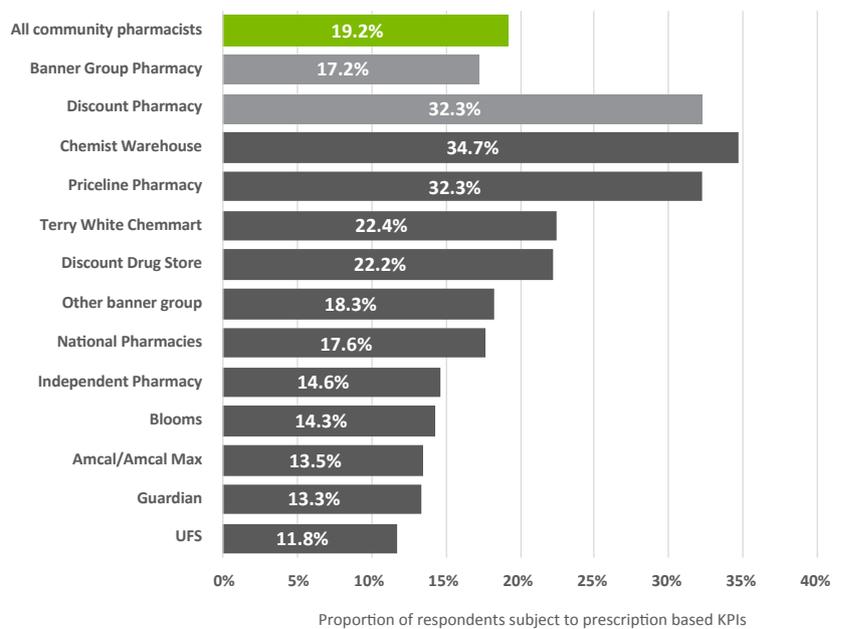
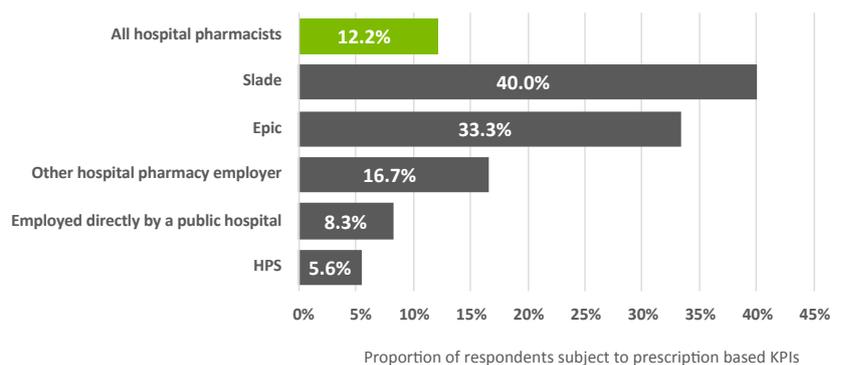


FIGURE 36 - HOSPITAL PHARMACIST PREVALENCE OF PRESCRIPTION BASED KPI'S BY EMPLOYER





PROFESSIONAL SERVICES

There is a range of professional services which community pharmacists commonly offer as part of their responsibilities. These services utilise a pharmacist's professional knowledge, can attract additional payments to a pharmacy, and are done in addition to a pharmacist's regular duties. The most common service reportedly done by pharmacists are Medschecks, followed by vaccinations. Performing Medschecks was more common for pharmacists employed in discount pharmacy chains, while vaccinations were more common in non-discount banner groups. It is rare for pharmacists to be paid for providing these additional services, but for a few working in discount pharmacy chains there was some reward for performing vaccinations.

FIGURE 37 - PROFESSIONAL SERVICES PROVIDED BY COMMUNITY PHARMACISTS

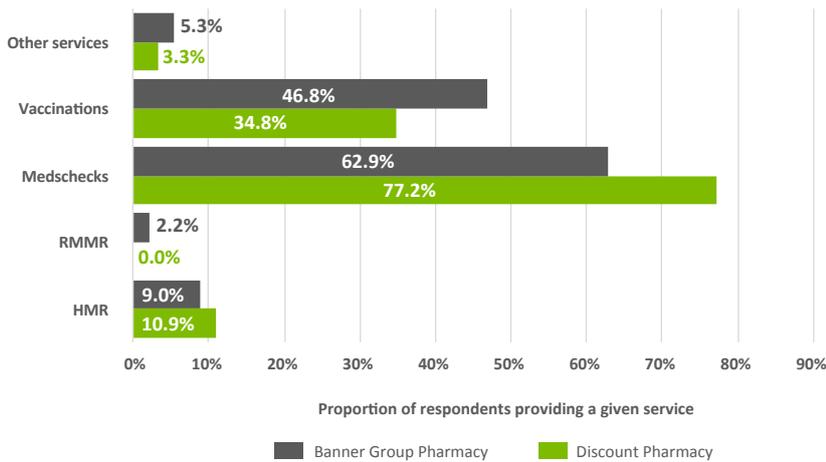
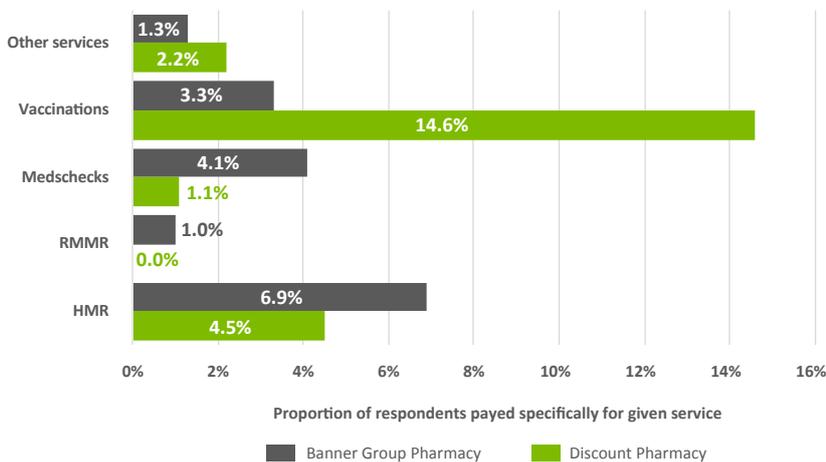


FIGURE 38 - PREVALENCE OF PAY FOR PERFORMING PROFESSIONAL SERVICES





HOURS OF WORK

Pharmacists responding to the survey were asked how many hours they work in an average week. Australian law provides for a maximum working week of 38 hours for full-time staff. Requiring staff to work longer than that typically requires additional compensation and often at an increased rate. The average pharmacist in both community and hospital pharmacy reported working hours close to this maximum at lower levels of responsibility. More experienced pharmacists were much more likely to report working more than 40 hours each week, particularly Directors of Pharmacy employed in hospital pharmacy who reported working an average of 43.7 hours in a regular week.

FIGURE 39 - COMMUNITY PHARMACIST MEAN HOURS OF WORK BY CLASSIFICATION

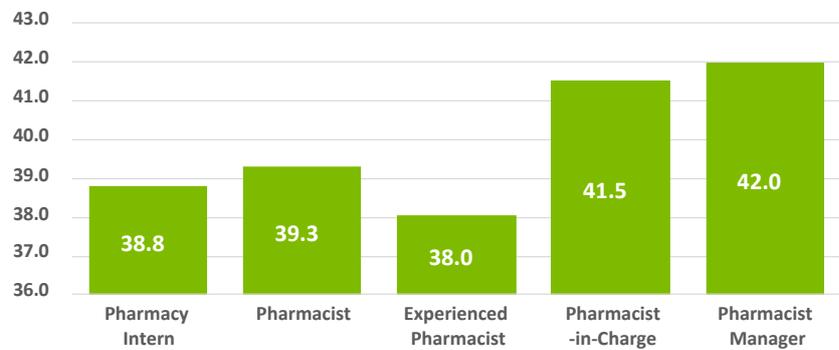


FIGURE 40 - HOSPITAL PHARMACIST MEAN HOURS OF WORK BY CLASSIFICATION

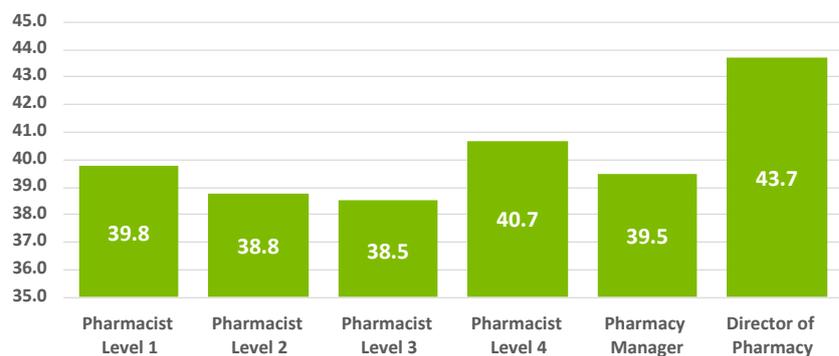


TABLE 5 - COMMUNITY PHARMACISTS HOURS OF WORK BY CLASSIFICATION

| | Hours worked each week | | | | |
|---------------------------|------------------------|----------------|--------|----------------|------|
| | N | Lower quartile | Median | Upper quartile | Mean |
| Pharmacy Intern | 10 | 38.00 | 38.00 | 40.00 | 38.8 |
| Pharmacist | 54 | 38.00 | 39.00 | 40.00 | 39.3 |
| Experienced Pharmacist | 35 | 38.00 | 38.00 | 40.00 | 38.0 |
| Pharmacist-in-Charge | 88 | 38.00 | 40.00 | 45.00 | 41.5 |
| Pharmacist Manager | 73 | 38.00 | 41.00 | 45.00 | 42.0 |
| All community pharmacists | 260 | 38.00 | 40.00 | 42.00 | 40.6 |

TABLE 6 - HOSPITAL PHARMACISTS HOURS OF WORK BY CLASSIFICATION

| | Hours worked each week | | | | |
|--------------------------|------------------------|----------------|--------|----------------|------|
| | N | Lower quartile | Median | Upper quartile | Mean |
| Pharmacist Level 1 | 30 | 38.00 | 40.00 | 40.00 | 39.8 |
| Pharmacist Level 2 | 14 | 38.00 | 39.00 | 40.00 | 38.8 |
| Pharmacist Level 3 | 33 | 38.00 | 38.00 | 40.00 | 38.5 |
| Pharmacist Level 4 | 18 | 38.00 | 40.00 | 42.00 | 40.7 |
| Pharmacy Manager | 16 | 38.00 | 40.00 | 40.00 | 39.5 |
| Director of Pharmacy | 7 | 38.00 | 45.00 | 50.00 | 43.7 |
| All hospital pharmacists | 118 | 38.00 | 40.00 | 40.00 | 39.6 |

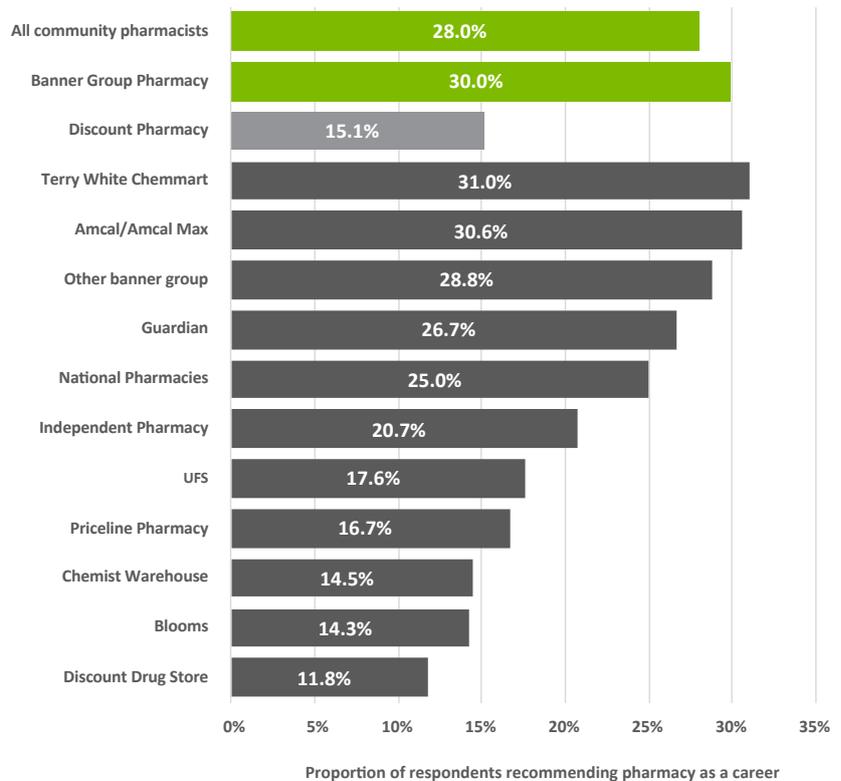




EMPLOYMENT OUTLOOK AND MORALE

Pharmacists have endured years of downward pressure on wages, hazy career progression, and a lack of respect for their important role in our communities. Combined these have had a negative impact on morale, leading to a generation of pharmacists that aren't even confident of recommending their profession to others. Only 28.0% of community pharmacists indicated they would recommend pharmacy as a career. Sentiment was even more negative amongst pharmacists employed at discount pharmacy chains with a slim 15.1% recommending pharmacy as a career. Attitudes were more positive amongst pharmacists employed in the hospital industry, but even then less than half recommended pharmacy as a career.

FIGURE 41 - COMMUNITY PHARMACIST WILLINGNESS TO RECOMMEND PHARMACY AS A CAREER BY BANNER GROUP



Pharmacists were asked to indicate the factors contributing towards any unhappiness they feel working as a pharmacist. For both hospital and community pharmacists the biggest cause of unhappiness was the pressures and stress of work followed by inadequate staffing. Poor pay also featured as a major factor for community pharmacists, although it was much less of an issue for hospital pharmacists. Within community pharmacy almost all factors respondents could choose from were indicated as contributing towards their unhappiness more amongst those employed at discount chains than their peers at other banner groups. Poor pay, the pressures and stress of work and inadequate staffing were all substantially more of an issue at the discount chains.

Such low morale in the industry creates the risk of pharmacists abandoning their profession. Respondents were asked to indicate whether they intended to remain employed as a pharmacist over the next five years. A shocking 30.3% of pharmacists employed at discount pharmacy chains said they intended to leave the profession, compared with 13.7% of pharmacists employed with other banner groups. Morale appeared better in hospital pharmacy, with only 8.9% reporting an intention to leave their profession over the next five years.

Poor pay, stress and a lack of support, particularly amongst the discount chains continues to ferment a crisis in the sector that will see talented individuals abandon pharmacy for greener pastures.

FIGURE 42 - HOSPITAL PHARMACIST WILLINGNESS TO RECOMMEND PHARMACY AS A CAREER BY EMPLOYER

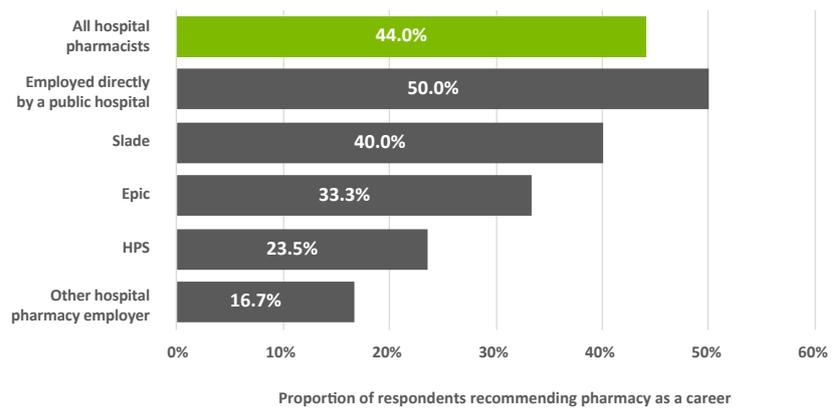


FIGURE 43 - FACTORS CONTRIBUTING TO UNHAPPINESS AS A PHARMACIST

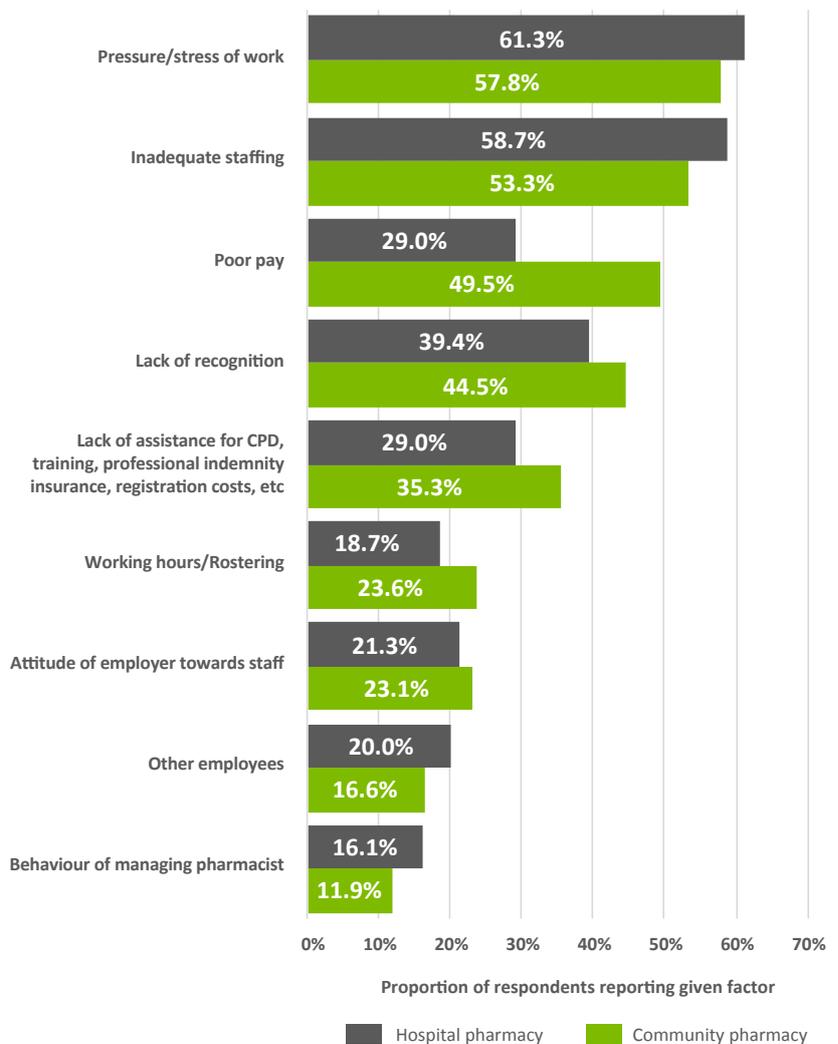




FIGURE 44 - INTENTIONS TO LEAVE PHARMACY BY EMPLOYER

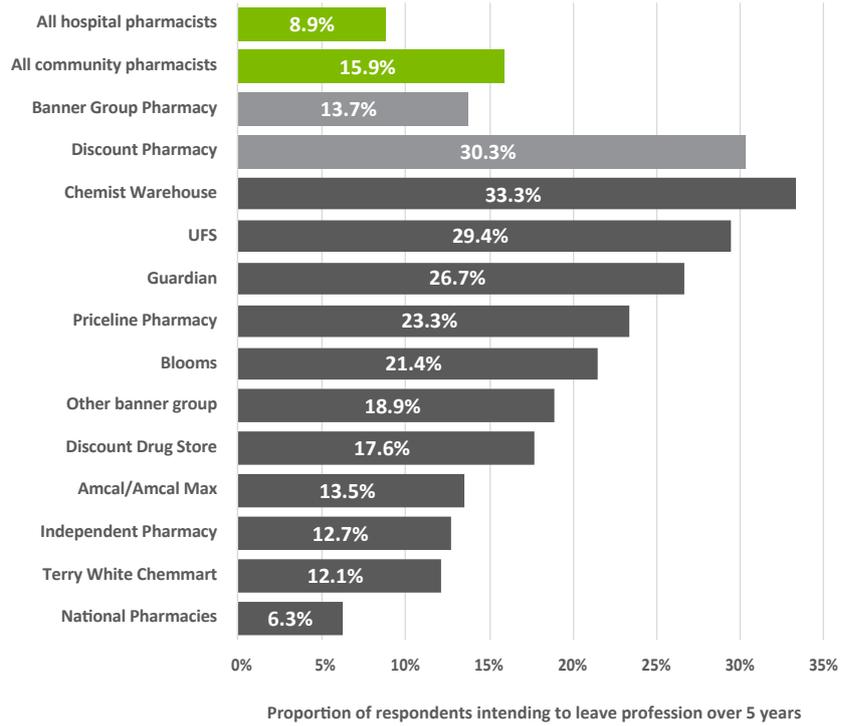
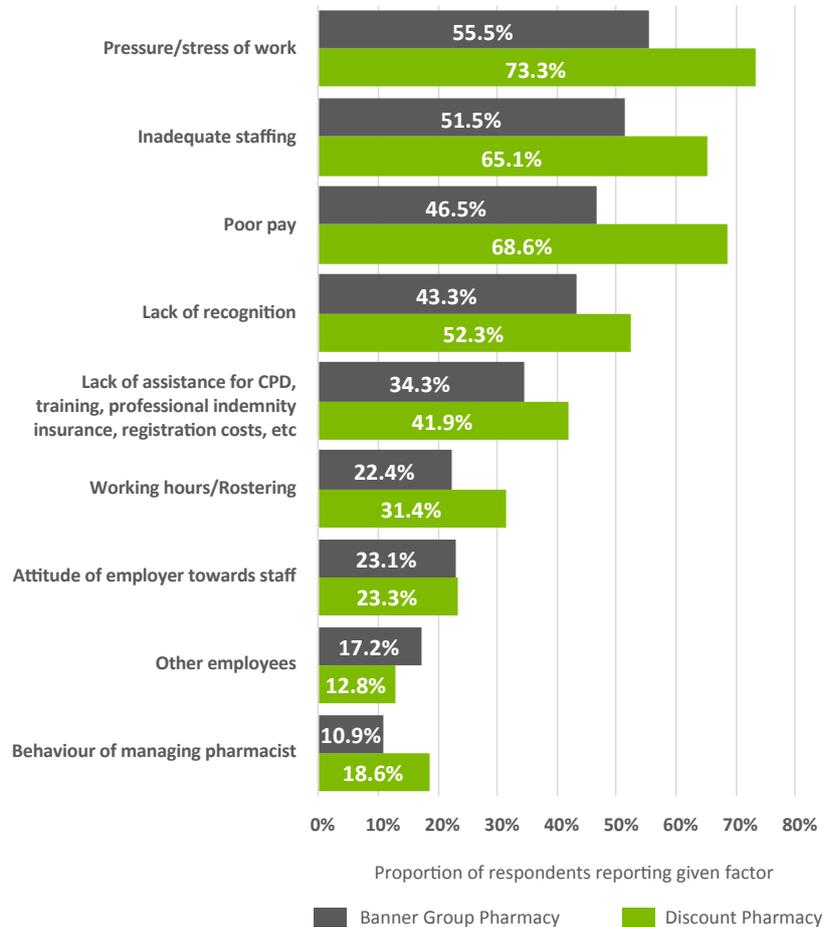


FIGURE 45 - COMMUNITY PHARMACIST FACTORS CONTRIBUTING TO UNHAPPINESS AS A PHARMACIST BY BANNER GROUP





NATIONAL EMPLOYMENT STANDARDS

The National Employment Standards (NES) are 10 minimum employment entitlements that must be provided to all employees. The national minimum wage and the NES make up the minimum entitlements for employees in Australia. An Award, employment contract, enterprise agreement or other registered agreement cannot provide for conditions that are less than the national minimum wage or the NES. They cannot exclude the NES.

The 10 minimum entitlements of the NES are:

- Maximum weekly hours;
- Requests for flexible working arrangements;
- Parental leave and related entitlements;
- Annual leave;
- Personal/carer's leave, compassionate leave and unpaid family and domestic violence leave;
- Community service leave;
- Long service leave;
- Public holidays;
- Notice of termination and redundancy pay; and
- Fair Work Information Statement.

All full-time and part-time employees in the national workplace relations system are covered by the NES regardless of the award, registered agreement or employment contract that applies. For further information on the National Employment Standards and their application, visit the Employee entitlements section of the Fair Work Ombudsman's website at:

<https://www.fairwork.gov.au/employee-entitlements/national-employment-standards>



ABOUT THE SURVEY

The 2019/20 Community and Hospital Pharmacists' Remuneration Survey is part of an annual series conducted by Professional Pharmacists Australia to track employment conditions and rates of pay for Australia's pharmacy professionals.

The survey includes 42 questions covering participant demographics, rates of pay including a comprehensive breakdown of penalty loadings, services delivered by Community Pharmacists, and overall workplace experience. All questions are optional. Questions are a mix of multiple choice and free text entry. Where participants were asked to give an absolute value but instead provided a range, the midpoint of that range was used as their response.

The survey was conducted during April 2019 and was completed by 1,021 participants from across Australia. Participation was incentivised by offering respondents the opportunity to enter the draw to win a single prize of a \$500 JB-HiFi voucher. In the event a participant completed the survey twice, only their most complete submission was retained.

For participants to be included in analyses they had to be employed as a pharmacist at the time they completed the survey and based in Australia. For each question, only those who provided a valid response were included in the analysis. As a result, sample numbers used in each analysis will differ.

For the purpose of analyses, the following statistics were used:

- N: The number of observations recorded for each category. Where insufficient observations were recorded to publish a result SNR (Sample Not Representative) is recorded instead;
- Lower Decile (10th Percentile): The value below which 10% of observations were recorded. Not reported where N is less than 10;
- Lower Quartile (25th Percentile): The value below which 25% of observations were recorded. Not reported where N is less than 5;
- Median (50th Percentile): The value below which 50% of observations were recorded. Not reported where N is less than 4;
- Upper Quartile (75th Percentile): The value below which 75% of observations were recorded. Not reported where N is less than 5;
- Upper Decile (90th Percentile): The value below which 90% of

observations were recorded. Not reported where N is less than 10;

- Mean: The sum of all individual values divided by the number of observations;
- Response %: Proportion of the survey sample represented by the number of observations in a given category.

Statistics for Salary and Hourly Rates of Pay are calculated separately for each of the sample respondents, and then ranked. The median is not, therefore, a reflection of the middle-ranked respondent across all categories, but rather, the middle value of the particular component

when all values of that component are ranked. As a consequence, the component statistics will not add up to the value given by the overall statistic.

Where a significant difference exists between the value of the mean and the median, this will indicate the following:

- Where the mean is higher than the median, a number of high values were recorded, sufficient to skew the mean upwards away from the median;
- Conversely, if the mean is lower than the median, a number of low values were recorded, sufficient to skew the mean downwards, away from the median.
- If the mean and median are relatively close, the distribution was approximately normally distributed.

OTHER REMUNERATION REPORTS

Professionals Australia conducts a range of salary surveys and has available reports for Professional Engineers, Scientists and Pharmacists. You can download summary reports or purchase extended reports for Engineers and Scientists at <https://www.professionalsaustralia.org.au/survey-salary-reports/>

REPORT PREPARATION

This report was prepared by Alex Crowther, Surveys Manager for Professionals Australia with assistance from Paul Inglis, Jacki Baulch, Bianca Piljic and Dr Geoff March.



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**Professional
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Australia**

COMMUNITY AND HOSPITAL PHARMACISTS EMPLOYMENT AND REMUNERATION REPORT

2019-20

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