

02_PDL_Monica Lambley_Naomi Lim.mp3

Nic: [00:00:03] Welcome to Be Risk Ready, the PDL podcast your space to explore how risk intersects with pharmacy practice, leadership and professional growth. Regulatory notifications are a fairly common part of pharmacy practice. Our healthcare system is designed to be fair and transparent, and it allows consumers and other practitioners to ask questions about our practice, supporting ongoing safety and accountability. So what's the process then, once a notification is received? And how do we manage risk, reputation and any mental health concerns along the journey? Well, there are several regulatory bodies that receive and manage regulatory notifications across Australia, including Ahpra, the Australian Health Practitioner Regulation Agency, the Pharmacy Council, Hcpc, the New South Wales Healthcare and Complaints Commission and Office of the Health Ombudsman in Queensland, just to name a few. Representing Ahpra is Monika Lambley, acting executive director of Health Regulation, and in this episode she's in discussion with Amy Minion, PDL lead Pharmacist Education and Professional Development and host of the Be Risk Ready Podcast, and Naomi Lim, Professional Officer at PDL and chair of the Victorian Local Advisory Committee. Together, they'll demystify regulatory notifications and share practical strategies for navigating the process.

Amy: [00:01:38] Today, we're tackling a topic that can cause a lot of stress for pharmacists regulatory notifications. Receiving one can feel daunting, but understanding the process, what regulators look for and how to respond can make a huge difference. In this episode, we'll break down what a regulatory Train notification is and what it isn't. Along with some common reasons why they occur. Next, we'll walk through what this experience can teach us and a few tips to navigate the process with confidence if it does happen. Finally, we'll share some practical strategies to stay ahead and reduce the likelihood of receiving a notification. And to that end, let's get stuck into it. Hello and welcome to Monica.

Monica: [00:02:24] Hi, Amy. Hi, Naomi. Great to see you both.

Amy: [00:02:27] And Naomi.

Naomi: [00:02:28] Hi, Amy and Monica.

Amy: [00:02:30] I might start with the lovely Monica. What is meant by a regulatory notification?

Monica: [00:02:36] I think one of the first things to talk about is what is a notification? But what happens when we receive information about a practitioner? So our legislation means the threshold for what is considered a notification is actually quite low. In fact, when information is raised with us, it only needs to meet two key criteria to be considered a Notification. The first one is the information needs to identify registered health practitioner, and the information needs to raise a concern about their health, performance or their behavior. And it's really important to talk about that decision making, because it helps practitioners to understand that when a notification is raised, it doesn't mean that they've done something wrong or there's an error. It just means that we've received information about them.

Amy: [00:03:21] And building on what you just said. Are you able to talk a little bit about how many pharmacists have had a concern raised about them each year?

Monica: [00:03:29] Yeah, of course. And I think it's really good to talk about the broader numbers first too. So across Australia there's a little over 40,000 registered pharmacies. And in the last financial year, only 420 of those practitioners received a notification. And of those, 90% of the notifications were closed without any action being taken by the regulator. So fewer than a 1% of pharmacists were notification has been made will be considered serious enough to have their registration cancelled or even suspended. The remaining 8 to 9% of pharmacists will have a notification where they're either cautioned and, if people are aware, cautions are not published on the public register, or they might be asked to complete education or mentoring by way of a condition or an undertaking.

Amy: [00:04:15] And from your perspective as a PDL professional officer, Naomi, what do you think pharmacists struggle with when they receive regulatory notification.

Naomi: [00:04:24] When pharmacists receive a regulatory notification? I think the first struggle is almost always emotional. Perhaps it hits at the core of who we are. Pharmacy is a profession built on precision, trust and the expectation that we don't get things wrong. So when the notification arrives, many pharmacists describe feelings of shock, denial, shame, even fear. Fear of reputational Harm. Fear for their registration, and fear that this one moment will overshadow years of safe practice. These emotions

can become quite consuming. Some pharmacists start to withdraw. They lose sleep. They stop eating well and even start to doubt their own competence. Many tell us they feel deeply alone, even though these experiences are far more common than we tend to admit. The second struggle is perhaps more of a practical one. Pharmacists often describe a kind of mental freeze. Where do I start? Who do I talk to? What does good look like in responding? And because regulatory notifications are rarely talked about openly, many don't understand the steps, the timelines, or even the support that is readily available. That uncertainty can amplify the stress. And when you're already emotionally overwhelmed, even simple tasks such as making a phone call or seeking advice can feel impossible. But here's the thing these reactions. They are normal. They are valid and they are human. So I feel like they should be manageable if we build better systems and better cultures around them. By bringing these struggles into the open, we can reduce stigma, protect mental health, and ultimately create a safer, more transparent profession.

Monica: [00:06:36] If I could jump in there too, Amy, I think, again, reiterating that point, that when a notification is received about practitioner, it doesn't mean that something has gone wrong or there is an error. It just means that we've received information because we hear that feedback that Naomi's talked through there as well. And we just really want people to understand that this is a process. And I think we're going to talk in a minute about some of the process steps that are involved in that, that really can, I think, support some of that understanding too.

Amy: [00:07:05] Yeah. Thanks both for humanizing this element. I think they're very valid feelings and you've been very real and transparent about them. Let's delve into what actually happens when a notification is made. So Monica, what sorts of things would a regulator be looking for in their assessment of a notification and how an outcome might be reached?

Monica: [00:07:26] Yeah, definitely. And I think the first thing I want to talk about is that almost all of our pharmacy notifications are reviewed by our pharmacists employed at Ahpra as a clinical advisor. So the clinical advisors will when the notification first comes in or the information is first received, they'll look at that information and determine if we do need further information, either from a practitioner or from another source. They'll also work alongside the case manager throughout the notifications process to assess

any information we receive and if we need to get further information. So we have a really strong clinical input across the notifications and compliance processes, that the information that we are seeking is often quite a small amount of information, and it usually just needs to be about confirming the information that we have or responding to a question that we might have. Sometimes it might be directly from the practitioners, other times it might be from their employer or their supervisor or somebody else. That could be a written response. And we really welcome the practitioner to talk to their indemnity insurer. They can contact their case manager, they can talk to a supervisor or an employer if they're comfortable about what information they want to provide in their response. And we can and we do understand that asking for information might appear like we're considering there's an error or there is a case to answer, so to speak.

Monica: [00:08:51] But that's not the case. We also want practitioners to think about this as a learning. So if going through the events that led to the notification, there is an opportunity to review or reflect or learn from that experience, then we really encourage people to put that in their response to the board. There's always an opportunity to learn and strengthen our professional practice. The other point that I'd really like to make about the process is so many of the concerns raised with opera are often because of a miscommunication or misunderstanding. Once we have all of the information, we collate it into a report that then is presented to the board, and then the board will make a decision based on all of that information. The practitioner will always be advised of the decision, and they'll often try and contact the practitioner either via phone in the first instance, or we'll definitely reach out to them, either via email or in writing, to let them know what the board's decided. Throughout the process. Practitioners are welcome to contact their case manager. Like I said before at Ahpra talk to PDL. I know they've got some great resources about what to do when a notification is made about you, and there's also information on the website, including a couple of webinars and information sheets about what to do when a notification is received too.

Amy: [00:10:08] Thanks, Monica. Having the understanding of the process adds a lot of depth to the conversation, I think, and for me at least takes away a lot of the stigma around the process. Going back to Naomi now, would you mind touching on what the process looks like on Pdl's end when pharmacists reach out to PDL? Where are they in the process and what do they need.

Naomi: [00:10:29] When a pharmacist reaches out to us? Many have said with the uncertainty or fear for days or even weeks before they make that first call. And so I think perhaps the first thing they need is clarity, someone to explain what happens next and steady the ground beneath them, if you like. Practically, we start by ensuring the incident has been properly documented. This includes submitting an incident report to us at PDL and collating all relevant documents. If it hasn't already been done so now from there the matter goes to the underwriter, which is good insurance to determine the cover under the policy. Once that's confirmed, someone is allocated to guide them whether the response is verbal or written. But the support pharmacist tells us they value most is actually peer support. Speaking with a professional officer, someone who understands the profession, that makes a huge difference. My colleagues and I generally work through reflections with them. What contributed to the incident? What systems were involved and what strategies might help to prevent similar occurrences in the future. So I guess in a nutshell, what pharmacists need is both direction and connection direction through a process that can feel intimidating, and connection that reminds them they're not facing it alone.

Amy: [00:12:08] Okay, so the incident has happened now. Next, we would want to look at how we can turn a challenge or a difficult situation like this into a learning opportunity. And what support systems might be out there to help pharmacists move forward confidently should they find themselves in a situation like this? So, Monica, how can practitioners show accountability and insight to support remediation and reduce the risk of further regulatory action?

Monica: [00:12:35] We have touched on this a little bit already. When a notification is made about a practitioner, of course, it's just information that's been received. So thinking about what led to those events, or potentially what led to that information. Being made to operate is always a good step. Naomi spoke before about not feeling like you're alone and reaching out and getting support, whether that is with PDL or with a supervisor, an employer, or if there's someone else that you're really comfortable with speaking to about the concerns being raised. We really recommend and encourage people to do that if they feel comfortable to do so. And the other piece is just seek further information. So our website has a lot of information about the process and how you might want to respond to information being received about you. It also has information if, say, a complaint or concern is raised through a different entity. So if, for

instance, there's a lot of entities within Australia where people can seek further information about a particular practice or area. All of those entities have information, and I recommend that people really look at that and the processes that are involved in it.

Amy: [00:13:40] Naomi, I'm aware you've been driving this initiative at PDL. I'd like to turn now towards the importance of pharmacists looking after their own wellbeing.

Naomi: [00:13:49] Where do I start? Maybe. Let's start with risk management. How does one minimise the risk of receiving a notification? I feel like staying informed, having good governance and accountability and soft skills all play a role. Staying informed just means, you know, knowing the legislation and any sort of guidelines or best practice standards out there. Governance can look like having robust standard operating procedures, clear roles and responsibilities, and just thinking about your workforce and your workflows. Reviewing incidents and near-misses regularly is also good governance. Accountability means working within your scope and having contemporaneous documentation for everything. Prioritizing self-care is also a form of accountability. Now, if we're thinking about soft skills, I think communication is right up there, especially in the context of the clinical. So when you are saying no to your patient, how you go about communicating that, how you justify your decision and how you document that would be quite crucial. Another one that comes to mind is de-escalation and problem solving. Problem solving is always a good skill to have in any place. And clinical acumen is so important. How do you interpret information? Recognize any red flags and apply sound judgment under pressure? I spoke earlier about self-care as taking accountability. Some may not realize that self-care isn't just a personal wellbeing strategy. It's a critical part of risk management. But there's a deeper layer we have to talk about, and that's culture. Now, when a pharmacist receives a regulatory notification, they are fearful not only of the process itself, but the judgment of their peers. And I think we have to ask ourselves gently but honestly, where does that stigma come from? How many of us have even unintentionally held assumptions about what it means to receive a notification at an individual level? It begins with challenging our own assumptions and supporting our colleagues with compassion, mistakes, near misses, notifications.

Naomi: [00:16:24] They don't define someone, they're simply part of practicing in a complex, high pressure, high expectation environment. So perhaps we can all ask

ourselves this week, could I open a conversation with a colleague about a learning moment or a near miss. And if I receive a notification tomorrow, what support would I hope others would offer me at the organizational level? We need workplaces that make it safe to speak up early about uncertainty, pressures, concerns without fear of judgment. And that means embedding support structures and ensuring they are lived in practice, not just written in policy. Maybe it means having leaders that model openness and show that seeking support is a normal, responsible part of our professional lives. I think it's helpful to reflect for a moment on your own workplace. How are mistakes discussed? Does your team feel psychologically safe, and are there unspoken rules that might discourage reporting or seeking support? These cultural factors matter. They shape behavior more powerfully than any policy. And here's the broader perspective. When we build supportive cultures, everyone benefits. Patients, pharmacists and the profession as a whole. So if we can shift that narrative from fear and judgment to learning and support, I think we can change not just how we respond to notifications, but how we practice every day.

Monica: [00:18:12] I'd have to agree with that, Amy. A really high proportion of the information that we receive relates to a miscommunication or a misunderstanding, often by the customer or the patient that a practitioner is working with. So as Naomi just spoke through, then it might seem really obvious, but we really want to encourage practitioners to remain engaged with their colleagues and their peer networks, whether that's in the workplace or outside. Review board newsletters, attend information sessions and seminars. Ensure you're meeting your CPD obligations and wherever possible. Again, speaking with your peers and colleagues about some of the practice and how it's working within your workplace. Again, I'd also reiterate what Naomi said about self-care and health and wellbeing. I mean, we have a pharmacy support service that's available. It's confidential. It's free that people can contact if they have concerns about their health. So we really encourage people to utilise that service. But of course, just taking breaks and really taking care of yourself, because I think that also impacts how we work.

Amy: [00:19:13] I really like how you've both framed that. It's not just about showing leadership in practice, is it? It's equally important to demonstrate leadership of self displaying, emotional awareness and self-regulation. And, as Naomi mentioned,

shaping that supportive culture around you. Really valuable points there, guys. I think a lot of listeners will relate to that.

Monica: [00:19:34] I think we can also say with many health practitioners, not just pharmacists, it can be so easy to really get captured into the work that we're doing. And we know lots of people rely on health practitioners and pharmacists. But again, it's so important to look after yourself as well.

Amy: [00:19:50] Absolutely. So let's turn our attention now to how to get ahead of it all. In an ideal world, no pharmacist would want to face a regulatory notification. So, Monica, what practical steps can they take to stay ahead of risk and minimise the chance of one landing on their desk.

Monica: [00:20:09] In terms of maintaining CPD? Engaging with networks and peers. Keeping up to date with any board guidance or resources. I know there's newsletters that the pharmacy boards send out. I would be engaging with any resources that PDL offer or just generally profession advice. And again, making sure that we're taking care of ourselves and keeping our health and wellbeing really forefront of the work that we do.

Amy: [00:20:35] Yeah. And again, we've covered most of this. Naomi. Do you have any final comments? Looking through the lens of a professional officer about what other things pharmacists could keep in mind when it comes to regulatory notifications or a final call to action for our colleagues?

Naomi: [00:20:51] Yeah, and I agree that obviously no pharmacist wants to be in this situation because receiving a notification is confronting and uncomfortable. But the reality is it can happen to anyone. And because it can, I feel like the important mindset to have is actually acceptance. Not fear, not avoidance, but acceptance and preparedness at PDL. Our aim is to make the process less daunting by building awareness early. We have done heaps right? Like a lot, right? So through webinars, student and intern engagements, we've written practice alerts, AJP articles. We've done interviews, we've created fact sheets. And through our everyday conversations with members, we quote these statistics to try and help put things in perspective. I think being proactive means staying informed, you know. Read our annual report, explore PDR resources available. Reflect regularly on your practice and stay connected with

your professional community. The more you understand the process, the more empowered you will be. If a notification ever comes your way, and if I may, I would like to leave you with this. Why is it still so hard for us as a profession to talk about mistakes and notifications, and what role can each of us play to change that?

Amy: [00:22:22] Naomi, thank you so much. It's been incredibly valuable to learn from you and have your perspectives on what can be a really daunting experience.

Naomi: [00:22:30] You're welcome. Amy. I'm grateful that we're talking about this openly. I think together we can drive change one conversation at a time.

Amy: [00:22:40] I love that and Monica equally to you. It's been wonderful to get your insights on this sensitive topic as well.

Monica: [00:22:47] Thanks, Amy. I would also just want to say that if a notification is raised, seek information. Ask as many questions as you need to ask. That would be my recommendation for any practitioner out there that does get a notification.

Amy: [00:23:00] All right. So let's quickly recap what we've covered today. First we unpacked and demystified the concept of regulatory notifications. What they are what they're not and some common reasons they might occur. We then looked at switching up a challenging experience into a learning opportunity, including what near-misses can teach us and the resources and support systems available to help pharmacists respond constructively and move forward. And we wrapped up by exploring a few simple, proactive strategies that pharmacists can use to reduce the risk of receiving a notification. You'll also find links to guides and references we've spoken about in the show notes of this episode. And if you have similar experiences, questions, or comments, please email them through to us at info. We'd love to hear from you and we'll be back next episode with more insights to support your practice.

Nic: [00:24:01] You've been listening to Be Risk Ready, the PDL podcast produced by Sound Cartel. Listen at. And follow free wherever you listen to podcasts.