

## CODE OF ETHICS

The purpose of this Code is to provide guidance to SHPA members about professional conduct and interactions with consumers, other health professionals and the community. Pharmacists are health professionals who assist consumers in all aspects of the safe and effective use of medicines. Pharmacists work independently with patients and also alongside doctors, nurses and other health professionals in multidisciplinary teams.

Pharmacists have overall responsibility for the pharmaceutical services being provided. Pharmacy technicians (or assistants) carry out functions under the supervision of a pharmacist that do not require independent professional judgment. Pharmacists and pharmacy technicians must act in the best interests of patients and the wider community, and work in partnership with patients and other health professionals.

Pharmacists have established roles at all steps of the medicines management pathway in hospitals.<sup>1</sup> With more professional services being offered via community pharmacy and other pharmacy practice settings, the medicines management pathway concept will play an increasingly greater role across the continuum of care.

**In accord with their individual roles**, pharmacists and pharmacy technicians (under supervision) take responsibility for their own actions and when providing pharmacy services they must:

1. hold the best interests of the patient and the wider community as the central focus and avoid harm in any form or manner. All patient services must be provided with courtesy, respect and confidentiality.
2. respect the patient's right to informed consent, to participate in decisions about care and to refuse treatment. Patients must be provided with sufficient, relevant, readily understandable information to allow them to make informed decisions.
3. maintain professional competence and endeavour at all times to provide a pharmacy service to the highest possible standards in keeping with the mission of the profession, and with the relevant laws, standards, guidelines and codes of practice.
4. act with honesty and integrity and avoid conflict of interest or situations that may compromise the professional relationship or influence the objectivity of judgments. They must not engage in behaviour or activity likely to bring the profession of pharmacy into disrepute or undermine public confidence.
5. contribute to the knowledge base of the profession through teaching, research and publication. Pharmacists have a consequent responsibility to provide information and advice about medicines to health professionals, patients and the community. Such information should be based on the principles of the quality use of medicines and be current, accurate, evidence-based, timely and appropriate.
6. maintain an effective professional relationship with colleagues and other health professionals, respecting their abilities, opinions and achievements and demonstrating a willingness to provide advice and support.
7. when involved in research, observe the requirements of duly constituted institutional ethics committees, and relevant national and international declarations. They must observe intellectual property rights, copyright and due acknowledgment in scientific publication, and openly declare all financial and non-financial interests when reporting scientific findings. Patients participating in clinical research must be provided with comprehensive information, including declaration of any conflict of interest, to allow them to provide informed consent.
8. endeavour to avoid discrimination of any type and ensure the fair distribution of medicines and treatment to the best of their ability.

### Reference

1. Stowasser DA et al. *Understanding the medicines management pathway. J Pharm Pract Res 2004; 34: 293-6.*

*This code was revised with reference to similar documents from the Royal Pharmaceutical Society of Great Britain, the American Society of Health-System Pharmacists and the Pharmaceutical Society of Australia. General advice from Ms Betty Chaar, Lecturer in Pharmacy Practice and PhD scholar in pharmacy ethics, University of Sydney, is acknowledged.*

**Adopted by SHPA Federal Council – February 2006**

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