

European Survey

Introduction

This report is based on a survey among the members of the European Association of Pharmacy Technicians, which was conducted in 2015, with the latest review in 2017

The purpose of the survey is to give a detailed and easily accessible overview of the differences and similarities between the scope of practice Pharmacy Technicians working in Community Pharmacy.

The definition of a Pharmacy Technicians for the purpose of this survey is the professional staff group that works with and immediately below a Pharmacist.

The survey has two sections: The first section is an overview of possible tasks that a Pharmacy Technicians are legally allowed to do and not to do in Community Pharmacies. In other words, where the Pharmacy Technician bears the legal responsibility of the action, and can ultimately be prosecuted for, if there is an error following that action.

The second section has additional information, which is relevant when comparing the practice of community pharmacy technicians across countries.

By shifting between yes/no answers, free text and comments depending on the type of question, the reports strikes a balance between easy overview and qualitative depth.

Respondents

Country Code	Country	Name of respondent organisation	Title of the Pharmacy Technician course, in the national language	Title of the Pharmacy Technician course, in English
HR	Croatia	Croatian Association of Pharmacy Technicians	Farmaceutski Tehničar	Pharmacy Technician
CZ	Czech Republic	Czech Association of Nurses – Section of Pharmacy Technicians	Diplomovaný farmaceutický asistent	Graduate Pharmacy assistant / technician
DK	Denmark	Danish Association of Pharmaconomists	Farmakonom	Pharmaconomist
FI	Finland	Service union united PAM	Lääkealan perustutkinto	Vocational Qualification in Pharmaceutics
FR	France	ANPPH -Association Nationale des Préparateurs en Pharmacie Hospitalière	Brevet professionnel de préparateur en pharmacie	Vocational diploma of pharmacy technician
DE	Germany	ADEXA Die Apotheken- gewerkschaft	Ausbildung zur /zum pharmazeutisch-technischen Assistent/in	Education for Pharmacy Technicians
HU	Hungary	MESZK (Magyar Egészségügyi Szakdolgozói Kamara - Council of Hungarian Paramedical Professionals)	Gyógyszerkiadó szakasszisztens	Dispensing Pharmacy Technician
IE	Ireland	IACPT	Higher Certificate in Science (Pharmacy Technician) Level 6	-
NO	Norway	Farmasiforbundet	Apotekteknikk Vg3	Pharmacy technology Vg3
PT	Portugal	Associação Portuguesa de Licenciados em Farmácia	Licenciatura em Farmácia	Bachelor(Hons) in Pharmacy
RS	Serbia	Association of the Pharmacy Technicians of Serbia "Sveti Sava" (UFTS)	Medicinska škola – Farmaceutski Tehničar	School of Medicine- direction for Pharmacy Technicians
SI	Slovenia	Slovenian Pharmaceutical Society	Farmacevtski Tehnik	Pharmacy Technician
SE	Sweden	Unionen Pharmacy & Health	Apotekstekniker Yrkeshögskoleut-bildning	Pharmacy Technician Higher Vocational Education
UK	United Kingdom	Association of Pharmacy Technicians UK (APTUK)	2 x Qualifications are needed: Level 3 NVQ Diploma in Pharmacy Service Skills (QCF) & Level 3 Diploma in Pharmaceutical Science	-

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<u>Community Pharmacy Technicians – scope of practice</u>

The following questions are specifically about Pharmacy Technicians working in Community Pharmacies, their authorised tasks, salaries and collective agreements. It is a list of yes and no questions to what a Community Pharmacy Technician are authorised to do in their daily duties, and therefore are legally responsible for.

Customer Service	HR	CZ	DK	FI	FR	DE	HU	IE	NO	PT	RS	SI	SE	UK
Are you allowed to receive the prescription?			Х	Х		Х	Х	Х	Х	Х			Х	Х
Are you allowed to take the personal details?		Х	Х	Х	Х	Х	Х	Х	Х	Х	Х		Х	Х
Are you allowed to question about allergy?		Х	Х		Х	Х	Х	Х	Х	Х	Х	Х	Х	Х
Are you allowed to question about interactions?		Х	Х		Х	Х	Х	Х	Х	Х			Х	Х
Are you allowed to question about: strength, dose, type of drug, etc?		Х	Х	Х	Х	Х		Х	Х	Х			Х	Х
Are you allowed to input the prescription into the Pharmacy's patient history file?			Х	х	х	Х	х	х	х	х			х	Х
Are you allowed to gather medicine for that prescription?			Х	Х	Х	Х	Х	Х		Х		Х	Х	Х
Are you allowed to label the medicine?			Х		Х	Х	Х	Х	Х	Х	Х	Х	Х	Х
Can you give the final check for the medicine?			Х			Х	Х			Х				Х
Can you give patient counselling on the prescription?			Х		Х	Х	Х	Х	Х	Х			Х	Х
Can you recommend OTC medication to a prescription?		Х	Х		Х	Х	Х	Х	Х	Х	Х	Х	Х	Х

Additional Information (Customer Service):

HR: PhT's in Croatia is not allowed to issue prescription drugs.

CZ: We have only the local version of the pharmacy's patient history file. Pharmacy technicians are not allowed to dispense Rx drugs. They are responsible for OTC and non-medicine.

DK: A Pharmacist must be present at Community Pharmacies, and a Pharmacist must be available by phone at a prescription drug outlet

DE: The prescription has to be checked from a pharmacist at the day of delivery, it can be done before giving it to the patient (mostly done in the beginning of the training or when there were errors before) or one time a day (mostly done in the evening and for the advanced Pharmacy Technician)

IE: All of the above answers are providing a qualified Pharmacist is on site and has allowed the Pharmacy Technician to complete the above tasks.

RS: In Serbia, the Pharmacy Technician has no contact with the recipes. Pharmacy Technicians can only sell drug whose declaration has been given without a doctor's prescription (recommendations of doctors). All of the above actions apply only to drugs that can be given without a doctor's prescription.

SL: In question 3, the Pharmacy Technician is only allowed to question about allergy when issuing OTC.

UK: Some of the above would be referred to the Pharmacist once the initial information had been gathered from the patient or their representative. Community Pharmacy Technicians can provide the patient with counselling when issuing the medicines but some system processes within some Pharmacies dictate that it is the Pharmacist who issues medicines. OTC medications would only be issued under strict protocols. To be able to undertake a final accuracy check requires additional training and assessment of competence

Prescription Query	HR	CZ	DK	FI	FR	DE	HU	IE	NO	PT	RS	SI	SE	UK
Can you call the prescriber to query the prescription, i.e. on strength, dose, interactions etc?			х		х	х		х		х				
Are you allowed to make appropriate amendments on a prescription, as a result of the query?			х		х			х		х				

Additional Information (Prescription Query):

CZ: You are allowed to call the prescriber, but the response is forwarded to the Pharmacist.

DK: You are allowed to make amendments in life-threatening situations, if the prescriber is unavailable.

DE: You are allowed to call the prescriber after consultation with a Pharmacist. And it depends on the amendments, we would need a new prescription, otherwise it would <u>not</u> be paid by the insurance company.

IE: Both is provided that a qualified Pharmacist is on site and has allowed the Pharmacy Technician to complete the above tasks.

PT: It is possible to make amendments, but a new prescription is needed for reimbursement.

UK: Some of the above would be referred to the Pharmacist once the initial information had been gathered from the patient or their representative. Community Pharmacy Technicians can provide the patient with counselling when issuing the medicines but some system processes within some Pharmacies dictate that it is the Pharmacist who issues medicines. OTC medications would only be issued under strict protocols. To be able to undertake a final accuracy check requires additional training and assessment of competence

Controlled Drugs (such as Morphine)	HR	CZ	DK	FI	FR	DE	HU	IE	NO	PT	RS	SI	SE	UK
Are you allowed to gather a controlled drug prescription?			Х		Х	Х		Χ	Х	Х			Х	
Are you allowed to dispense a controlled drug prescription?			Х		Х	Х		Х	Х	Х			Х	
Are you allowed to make an entry in the controlled drug registration system?			х		Х	х			х	х			х	
Are you allowed to check before delivery?			Х		Х					Х			Х	

Additional Information (Controlled Drugs):

UK: Some Pharmacies allows controlled drugs to be handled, others do not. It is at the discretion of the pharmacists.

Compounding, also known as magistral preparation	HR	CZ	DK	FI	FR	DE	HU	IE	NO	PT	RS	SI	SE	UK
Are you allowed to do compounding?		Х	Х	Х	Х	Х	Х	Х	Х	Х	Х	Х	Х	Х
Are you allowed to do compounding without supervision of a Pharmacist?		х			Х					х			Х	

How and how often, Pharmacy Technicians practice compounding in the countries:

HR: Only in certain Pharmacies, but it is not allowed to prepare magistral preparation such as Morphine

CZ: The frequency is dependent on the type and location of the Pharmacy: In Hospital Pharmacies, it is an every day occurrence. In Community Pharmacy, it is by the patient's requirements.

DK: The supervisor has to be a qualified person (in practice it is only Pharmacist). Two Pharmacies out of 238 Community Pharmacies in Denmark do magistral preparation, and one does cream and ointment compounding. These are then shipped to and administered by the individual Community Pharmacy. These three places have fulltime Pharmacy Technicians doing compounding, whereas a typical Pharmacy Technician, makes no compounding.

FR: In Community Pharmacy, it is basic compounding. For example: skin cream, capsule, dosing adjustment for pediatrics (with an hospital prescription). Sub-contracting developed (onerous material investment)

DE: The prescription has to be checked before compounding if it sounds plausible and everything is clear, than the Pharmacy Technician can make it. Depends on the Pharmacy and the location of the Pharmacy and if there is a dermatologist nearby. It varies from 2 compounding prescriptions a week to 20 and more a day.

HU: A Pharmacy Technician is only allowed to do the formulation. The measurement of different pharmaceutical substances/active-non active ingredients can be done only by a Pharmacist.

IE: Depending on the location of the Pharmacy, compounding could occur daily or once/twice monthly. Some Pharmacies choose not to compound at all. New compounding guidelines where issued in November 2014 to fall in line with new European guidelines. Pharmacy Technicians are trained in the compounding skills and are therefore capable of preparing this prescription.

PT: It depends on the Pharmacy and its geographical location. Sometimes, in cities with many Pharmacies, a Pharmacy prepares and sells the magistral preparations to other Pharmacies.

RS: In Pharmacies with the laboratory, it is an everyday occurrence. In Serbia, Pharmacy Technicians can only independently manufacture the magistral preparation for external use. All other matters relating to the preparation of the magistral preparation, the Pharmacy Technicians must work under the supervision of Pharmacists.

SI: It is an everyday occurrence, but with supervision of a Pharmacist.

SE: Only in special Hospital Pharmacies and in industry.

UK: The UK terminology is 'Extemporaneous dispensing'. This is part of the qualification syllabus for both the knowledge qualification (Pharmaceutical Science) and the competence of practise qualification (Pharmacy Service Skills). However following a high profile error in preparing an extemporaneous product a number of years ago which resulted in a baby dying, best practice now indicates that this type of compounding be under taken in special laboratories under controlled conditions. Therefore these products are more likely to be brought in rather than prepared in the Community Pharmacy, therefore it is a rare occurrence.

Unit Dose Medication	HR	CZ	DK	FI	FR	DE	HU	IE	NO	PT	RS	SI	SE	UK
In your country, do Community Pharmacies do unit dose dispensing?			Χ	Х		Х		Х	Χ		Х		X	X
Do you prepare medicine for unit dose dispensing?			Х			Х		Х	Х		Х		Х	Х
Do you pack medicine for unit dose dispensing?			Х			Х		Х	Х		Х		Х	Х
Can you sign off on the unit dose dispensing?									Χ		Х			
Are you allowed to do unit dose dispensing without supervision of a			X		•			X					X	
Pharmacist?			^					,					^	

How and how often, Pharmacy Technicians practice unit dose dispensing in the countries:

HR: The remedy shall be issued in the original packaging, example: 30 tablets for 30 days, marked on the box: 1 pill taken in the morning.

CZ: Unit dose dispensing is not practiced in our country.

DK: Unit dose packing is done at 9 out of 238 Community Pharmacies in Denmark. Which are then shipped to and checked by the individual Community Pharmacy. These nine places have fulltime Pharmacy Technicians doing unit dose packing, whereas a typical Pharmacy Technician, checks the incoming unit dose prescription, sends the order to the unit packing Pharmacy, and gives a final check when distributing.

FR: Unit dose dispensing is almost nonexistent, except for controlled drugs (such as morphine). It is sometimes used in medical retirement house for tablet organizer. Sometimes, cutting of the blisterpack, or removing from the blister and then re-packaging

DE: Community Pharmacies only do unit dose dispensing for old people's home and some other organisations, not for patients in the Pharmacy. The normal patient in the Pharmacy normally gets a finished product from the Pharmaceutical industry. If the Pharmacy supplies an old people's home a.s.o. it depends on the amount of people living there, so the Pharmacy does the dispensing one time a week or every day. Only about 10 % of the German Pharmacies do unit dose dispensing.

IE: All of the above answers are providing a qualified Pharmacist is on site and has allowed the Pharmacy Technician to complete the above tasks.

On receipt of a prescription which requires unit dose dispensing, the usual prescription checks are completed. The prescription is entered into the patient's medicinal record, labels printed and items gathered.

The Pharmacist checks the medication against the prescription and then medication can then be deblistered. Most Pharmacies will have unit dose dispensing record cards with the times the patient take their medication. The medication can now be placed into the unit dose trays, sealed and get their final check from the Pharmacist.

Depending on the number of drugs on the prescription the unit dose dispensing can take from start to finish, 15 minutes to 1 hour. The number of unit dose dispensing varies from each Pharmacy.

PT: Pharmacies do not do unit dose distribution in Portugal, although the law set conditions for its implementation.

RS: In Serbia, only Pharmacy Technicians in Hospital Pharmacies prepare medicine for unit dose dispensing.

SL: In Slovenia, only Pharmacy Technicians in Hospital Pharmacy prepare medicine for unit dose dispensing.

SE: In Sweden there are dose Pharmacies who only do dispensing and pack medicine for delivering out to Community Pharmacies and home for old/sick people (for geriatrick care). They will give the doses to the right persons. In this dose Pharmacies it is Pharmacists and Pharmacy Technicians working. They have the same education as the Pharmacists an Pharmacy Technicians who is working in Community Pharmacies

UK: UK only does unit doses in monitored dosage systems. However, there is about to be a pilot carried out in an English hospital on automatic unit dose dispensing.

Additional information on Community Pharmacies

Approximate distribution of working time	HR	CZ	DK	FI	FR	DE	HU	IE	NO	PT	RS	SI	SE	UK
Customer service	70%	30%	70%	40%	50%	70%	70%	30%	70%	60%	70%	50%	70%	70%
Compounding	10%	15%	1%	0%	4%	10%	10%	3%	5%	2%	0%	10%	1%	0%
Unit Dose Dispensing	0%	0%	1%	0%	0%	0%	0%	22%	0%	0%	0%	0%	0%	0%
Stock management, control and logistic	10%	40%	13%	38%	44%	15%	10%	10%	20%	30%	20%	40%	20%	20%
Education (training or being trained)	5%	5%	5%	2%	1%	2%	0%	5%	5%	5%	0%	0%	5%	5%
Miscellaneous administration not covered in the above	5%	10%	10%	20%	1%	3%	10%	30%	0%	3%	10%	0%	4%	5%

Additional Information:

RS: The answers are for pharmacies that does not have a lab.

Products commonly sold in pharmacies	HR	CZ	DK	FI	FR	DE	HU	IE	NO	PT	RS	SI	SE	UK
Cosmetics	Х			Х	Х	Х	Х	Х	Х	Х	Х	Х	Х	Х
Basic skin care	Х	Х	Х	Х	Х	Х		Х	Х	Х	Х	Х	Х	Х
OTC skin cream	Х	Х	Х	Х	Х	Х	Х	Х	Х	Х	Х	Х		Х
Perfumes and fragrances	Х				Х		Х	Х		Х	Х	Х		Х
Veterinary OTC		Х	Х	Х	Х	Х				Х		Х	Х	
Animal nutrition			Х							Х		Х	Х	
Electronic cigarettes														Х
Special diet products (Adult, Children etc.)	Х	Х	Х	Х	Х	Х	Х	Х	Х	Х	Х	Х	Х	Х
Food supplements	Х	Х	Х	Х	Х	Х	Х	Х	Х	Х	Х	Х	Х	Х

Additional Information:

DK: A new law has been passed at the time of writing, specifying that products such as cosmetics, perfumes, footwear, bags, clothes etc. are no longer allowed to be sold at pharmacies. Products which made up a large part of the non-medicine revenue, and will therefore likely change the distribution of revenue in the next table.

DE: The cosmetics sold are mostly the special pharmacy products (Vichy, Pierre Fabre, Roche Posay, Nuxe, Eucerin ..) not normal cosmetics you can buy in the drug store and products for sensible skin. Veterinary OTC and products are not sold in every pharmacy, depends on the location of the pharmacy and if there is an animal shop nearby.

IE: Electronic cigarettes have been refused a sales license in Irish pharmacies; however they are sold in supermarkets etc.

PT: In addition there is orthopaedics material, childcare, veterinary medicines and baby nutrition.

RS: Also footwear.

Distribution of revenue in pharmacies	HR	CZ	DK	FI	FR	DE	HU	IE	NO	PT	RS	SI	SE	UK
Non-medicine	30%	0%	14%	6%	10%	5%	10%	20%	27%	20%	30%	20%	20%	50%
Prescription medicine	40%	60%	78%	81%	65%	54%	60%	50%	63%	60%	40%	50%	70%	30%
Over-The-Counter medicine	20%	40%	8%	14%	25%	41%	30%	30%	10%	20%	30%	30%	10%	20%

Additional Information:

HR: There answer depends a lot on whether the pharmacy is, near a doctor, in a little town, in a village, in the center of city, if the pharmacy is public, private, part of large chain of pharmacy etc.

DK: The answers are the average of the year 2013

Technologies	HR	CZ	DK	FI	FR	DE	HU	IE	NO	PT	RS	SI	SE	UK
Robotic Storage and Dispensing	<25%	<25%	<50%	<25%	<25%	<25%	-	<25%	-	<25%	0%	<25%	<25%	<25%
Tablet computers	<25%	<25%	<25%	<25%	<25%	<25%	-	<25%	-	<25%	<50%	<25%	<25%	<25%
Internet access during the customer service	>75%	<25%	>75%	>75%	>75%	<50%	-	>75%	-	>75%	<50%	<50%	<50%	<50%
Unit dose dispensing: Automatic	<25%	<25%	>75%	<75%	<25%	<25%	-	<25%	-	0%	0%	<25%	>75%	<25%
Unit dose dispensing: Monitored Dosage System (cassettes)	<25%	<25%	-	0%	<25%	<25%	-	>75%	-	0%	0%	<25%	-	<75%
Unit dose dispensing: Manual	<25%	<25%	-	<50%	<25%	<25%	-	>75%	-	0%	<25%	<25%	-	<25%
Is a nationwide e-prescription system implemented?	Yes	Yes	Yes	Yes	No	No	-	No	-	Yes	Yes	Yes	Yes	No
If yes to the above, is there an automatic reimbursement (e.g. to the medical insurance) attached to the e-prescription?	Yes	No	Yes	Yes	No	-	1	-	-	Yes	Yes	Yes	Yes	

Additional Information:

<25% = Rare

<50% = Slightly Common

<75% = Common

>75% = Very Common

HR: Croatia has e-prescription, whereas the other technologies are very rare.

DK: Denmark has specialized dose pharmacies so unit dose dispensing is not done in individual community pharmacies. The dose pharmacies are all automatic.

FR: Smart tablet organizer, less than 25% (for example: for elderly persons). An e-prescription system is in an initial project phase.

HU: These technologies aren't implemented yet in the country.

SE: Sweden has dose pharmacies so they do not do dispensing in community pharmacies.

UK: There is an e-prescription service in the UK, but its locally driven and uses different systems

Lifelong Learning	HR	CZ	DK	FI	FR	DE	HU	IE	NO	PT	RS	SI	SE	UK
By law or collective agreement, do you have the right to or are required to take continuing education?		Required	Right to	Right to	Right to	Neither	Required	Neither	-	Right to	Required	Right to	Right to	Required
Who pays for the majority of the education?	Pharmacy	Pharmacy	Pharmacy	Pharmacy	Pharmacy	-	-	Yourself	-	Yourself	Pharmacy	Pharmacy	Yourself	Pharmacy
Do the courses increase your wage?	No	No	No	No	No	No	No	No	-	No	Yes	No	No	Yes
Can the courses be certifying or grant professional development (e.g. specialization)?	No	Yes	Yes	Yes	Yes	Yes	Yes	No	-	No	No	No	Yes	Yes

Additional Information:

HR: The law does not require that lifelong learning for Pharmacy Technicians or a that the license is renewed by education, but some pharmacies have internal rules that Pharmacy Technicians must take education, and that education will commonly be prepared by the pharmacies. 90% of such education is paid by the pharmacies or pharmaceutical industry. Some courses increase the wage, and there is specialization, however it is not regulated by the law, but is product of individual pharmacy politics.

FR: Specializations. For example: orthopedics, homeopathy and herbalist. These specializations lead to a higher wages with management of the shelf space.

DE: Payment of the lifelong learning is sometimes paid by the pharmacy, sometimes sponsored by the industry, in many states the pharmacy Chamber have a education program and it is not very expensive

IE: As technicians are not registered in Ireland, we have no legal obligation to continue further education. It very much depends on the individual to pursue their own educational needs or the pharmacy to promote the importance of education and upskilling. Many pharmacies are happy to allow time off for continued professional development.

SE: The Pharmacy Technician can have competence development in the pharmacy in the working time.

Average salary per month (2015)	HR	CZ	DK	FI	FR	DE	HU	IE	NO	PT	RS	SI	SE	UK
Local Currency	4500 AT	21000 AT	30058	2066	1835	2259	205000	2028	30000	900	30000	1300	26000	1667
Euro	588 AT	758 AT	4036	2066	1835	2259	648	2028	3324	900	247	1300	2753	2147
Euro corrected for Purchasing Power Parity	948 AT	1215 AT	3053	1691	1698	2189	1167	1826	2332	1156	551	1651	2169	1834

Explanation:

- The average is calculated as half, in case the provided data is a from-to amount, and as 40 hours per week where hourly wage is the data.
- Unless otherwise indicated, the wages are given before tax. AT indicates After Tax
- Exchange rates to EUR are per 1/1/2015
- Eurostat's Purchasing Power Parity (2015) is used to compare wages by correcting for differences in living costs.

Additional Information (Average salary per month):

HR: Received salary per month, an average of HRK 4000 to 5000.

CZ: The salaries vary in the state and the private sector. The salary is also dependent on the length of professional experience and work position. The monthly salary ranges in amounts from Net CZK 18,000 to 24,000.

DK: The wage includes a wage scale with 7 steps, determined by your seniority as a practicing Pharmacy Technician (not at the specific Pharmacy). In addition individual monthly or one-time pay supplements are added, for example based on qualifications or availability. Average wage: DKK 29815/month (Sep2014, including pay supplements, excluding employers' pension contribution at 11%). The average monthly pay supplement: DKK 2400/month

FI: Working hours are 115 in a three weeks period, and the minimum wage is from 1591€-2014€/month depending on the demand and working years. If the employee works over 9 hours/day or 120 hours/3weeks she gets an extra overtime payment from 50%-100%. The employee can also get additional payment for job-specific, personal and working conditions (evening-, Saturday and holy Eve, and night work). In September 2015, the average earnings for regular working hours were 2,066 euro per month for full-time employees.

FR: In the form of coefficient and point value. Point value at 1st of January 2015 : 4,320€. For community pharmacy technicians from coefficient 230 to 330. Average gross salary : 1834,60€. Seniority bonuses add to the salary: from 3 to 6 years +3%; from 6 to 9 years +6%; from 9 to 12 +9%; from 12 to 15 +12%; after 15 years +15%. Wages for 35 hours per week. 5 weeks of paid holidays per year

DE: A Pharmacy Technicians earns from €19268(1st + 2nd year of employment) up to €2549 a months with 40 hours working time a week, 33 days holiday and if the Pharmacy Technician is in the union (ADEXA) he/she might one time a year get an extra monthly payment.

HU: Approximately 180,000-230,000 HUF/month gross salary, before taxes.

IE: There is no pay scale for Community Pharmacy Technicians in Ireland. The average pay for a Community Pharmacy Technician is €11.70 per hour. The hour rate depending on experience and location can range from €9.00- €15.50 per hour.

NO: NOK 30,000 level per month

PT: Average salary is more or less, €900 per month, however negotiation is done on a case-by-case analysis due to the absence of collective agreement.

RS: The salary is around RSD 30,000 per month excluding health and pension insurance. The only addition to the salary is in addition to work experience and it is 0.4% each year for the operation of the company. In private Pharmacies salaries are very similar and depend solely on the agreement with the owner.

SI: The salary is between €900 and €2.300 per month. It depends on length of employment and varies between pharmacies.

SE: Pharmacy Technicians have a median wage of about 25,000 SEK/month. This year our members will have an increase of 2.4 % higher salaries from May 1st.

UK: No accurate information as UK Community Pharmacies are private businesses and terms and conditions would vary depending on the employer. Average: £20,000 per year. Higher for an accuracy checking Pharmacy Technician. £ 23,0000 per year

Community Pharmacies covered by collective bargaining agreements

HR: No accurate information, but by law, Community Pharmacies that are founded in the city or regions have collective agreements.

CZ: collective bargaining agreements are common only in Hospital Pharmacies. There are 2500 Pharmacies in the Czech Republic, of which 80 are Hospital Pharmacies (data is from 2011).

DK: 100%. Since all Community Pharmacies are members of the Community Pharmacy Employers Organization, and the Association of Pharmaconomist has a collective agreement with the Employer Organization covering all Pharmaconomists (Pharmacy Technicians) employed at Community Pharmacies.

FI: 100%. Since the Finnish system is based on that the Union takes care of the bargaining for the collective agreement (working conditions and wages). All the employers must follow the collective agreement and also pay at least the minimum wage to all the employees.

DE: Except on state (Sachsen) most employers keep to the collective agreement.

HU: Unfortunately there are not any collective agreements in charge in Hungary.

IE: N/A

NO: 100%.

PT: There are no collective agreements for Pharmacy Technicians. Thus employment contracts are negotiated directly between Pharmacy Technicians and the employer.

RS: Only state Pharmacies, where approximately 40% are covered by collective agreements.

SI: 70%

SE: 98%

UK: There is no collective bargaining for Community Pharmacy Technicians as each Pharmacy is either independently owned or owned by a large chain i.e. Boots etc. There is collective bargaining in the NHS for Hospital Pharmacy Technicians and this is about 40% of the Pharmacy Technician workforce.