Owner Manager Survey
This survey aims to gather general information about the pharmacy. This information will be analysed by researchers to determine if certain characteristics of a pharmacy influence the rate of recording clinical interventions.

The information provided in this survey will only be available to researchers and no identifiable results will be published.

General Pharmacy Information

* PG2: What is the approximate size of the pharmacy? Please choose *only one* of the following:
- Less than 100m²
- 101 - 150m²
- 151 - 250m²
- 251 - 500m²
- Over 500m²

* PG4: What was the pharmacy's estimated turnover in the 2007/08 financial year? Please choose *only one* of the following:
- Less than 1.0M
- 1.0 - 1.5M
- 1.5 - 2.0M
- 2.0 - 2.5M
- 2.5 - 3.0M
- 3.0 - 4.0M
- 4.0 - 5.0M
- Over 5.0M

* PG20: What is the pharmacy's approximate weekly prescription turnover? Please choose *only one* of the following:
- Up to 400
- 401 - 600
- 601 - 800
- 801 - 1000
- 1001 - 1200
- 1201 - 1400
- 1401 - 2000
- Over 2000

* PG5: What approximate percentage of the pharmacy's business is attributable to the dispensary? Please write your answer here:

* PG6: How many pharmacists are responsible for making business decisions in this pharmacy?
Please choose *only one* of the following:
- One
- Two or more

* PG7: Is the pharmacy part of a banner or brand group?
Please choose *only one* of the following:
- No, independent pharmacy
- Other

* PG8: Does the pharmacy supply an aged care facility?
Please choose *only one* of the following:
- Yes
- No

* PG9: How many days per week is the pharmacy open?
Please write your answer here:

* PG10: How many hours per week is the pharmacy open?
Please write your answer here:

* PG11: How many Full Time Equivalent staff work in the pharmacy each week?
Please write your answer(s) here:

- Pharmacists:
- Graduate Pharmacists:
- Dispensary Assistants:
- Pharmacy Assistants:

* PG12: What proportion of prescriptions are assembled by dispensary technicians?
Please choose *only one* of the following:
- 0 - 20%
- 20 - 40%
- 40 - 60%
- 60 - 80%
- 80 - 100%

* PG13: Has the pharmacy employed a pre-registration pharmacist within the last two years?
Please choose *only one* of the following:
- Yes
- No
PG14: Are any additional pharmacy texts available for your pharmacists, other than the mandatory texts required by the Pharmacy Board?
Please choose *only one* of the following:
- No
- Other

PG15: Which Pharmacy Guild-funded professional services are currently provided by this pharmacy?
Please choose *all* that apply:
- Diabetes Medication Assistance Service (DMAS)
- Dose Administration Aids program (DAA)
- Patient Medication Profile program (PMP)
- Pharmacy Asthma Management Service (PAMS)
- Other:

* PG17: Which other services are currently provided by this pharmacy?
Please choose *all* that apply:
- Blood pressure monitoring
- Home medication reviews
- Dose administration aid packing
- Opioid dependency program
- Diabetes screening
- Wound care
- Weight management program
- Meds Index
- Other:

* PG18: Has this pharmacy been involved with any recent or current trials?
Please choose *only one* of the following:
- Yes
- No

[Only answer this question if you answered 'Yes' to question 'PG18 ']
* PG19:
Please specify the trials the pharmacy has been involved with:

Please write your answer here:

* PG16: Does your pharmacy use Mirixa?
Please choose *only one* of the following:

- Yes
- No

Submit your survey.
Thank you for completing this survey. Please fax your completed survey to: (03) 6226 8534.