

Media release

Tuesday 18 February 2020

A new standard for geriatric medicine pharmacists to improve safe, quality care of older Australians

Avoiding and reducing inappropriate polypharmacy, preventing adverse drug reactions (ADRs), ensuring safe medicine administration, and continuity of medication management during care transitions are the four central tenets of optimal geriatric pharmacy care, included in the Society of Hospital Pharmacists of Australia (SHPA)'s latest standard of pharmacy practice, released today.

Developed with input from the Australian and New Zealand Society for Geriatric Medicine (ANZSGM) and published less than three months after the [interim report](#) of the Royal Commission into Aged Care Quality and Safety, SHPA's [Standard of practice in geriatric medicine for pharmacy services](#) has highlighted the need for pharmacists with specific geriatric medicine expertise to work as part of interdisciplinary teams to improve the safety and quality of care for older Australians in hospitals, residential aged care facilities and in the community.

Dr Rohan Elliott, lead author of the Standard and immediate past Chair of SHPA's Geriatric Medicine Leadership Committee, says evidence from randomised controlled trials tells us clinical pharmacy services improve medication management and safety for older people in all care settings, and during transitions of care.

'Comprehensive, patient-centred medication reviews and assessment of patients' medication management are essential roles for geriatric medicine pharmacists.

'In this area, deprescribing has become a major focus. Along with medication regimen simplification, deprescribing can improve medicines adherence and reduce treatment burden for older people and their carers, ultimately improving comfort and quality of life among this vulnerable cohort.'

Chief Executive Kristin Michaels says the Standard of Practice forms part of SHPA's concerted response to a crisis in medication safety in older Australians.

'The high prevalence of polypharmacy in older people is an urgent concern; more than 50% of adult hospital bed-days in Australia are occupied by people aged 65 years and over, and more than 50% of medicines dispensed under the Pharmaceutical Benefits Scheme (PBS) are used to care for Australians in this age bracket.

'This key document builds on our response to November's Royal Commission interim report – which highlighted an urgent need to increase funding for medication management programs in residential aged

care – and comes as we work to harness our members’ expertise in contributing to the goals of Medicines Safety as a National Health Priority Area.’

‘In addition to the core goals of a geriatric medicine pharmacy service highlighted in this Standard, on behalf of members SHPA reiterates its call for specialty geriatric pharmacist roles to be embedded in residential and community aged care, as these experts are best equipped to identify and manage medication-related issues and reduce harm, while ensuring identification of deprescribing opportunities and high quality clinical handover as patients move between care settings.’

‘In particular, such pharmacists are uniquely positioned to determine if antipsychotic medicine prescribing is appropriate, an area in which we are failing older Australians, as revealed by the Royal Commission’s damning interim findings.’

The *Standard of practice in geriatric medicine for pharmacy services* was published in the February 2020 issue of the [Journal of Pharmacy Practice and Research \(JPPR\)](#), available through Wiley publishing and [free to SHPA members](#).

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About SHPA

The Society of Hospital Pharmacists of Australia (SHPA) is the national, professional, for-purpose organisation for leading pharmacists and pharmacy technicians working across Australia’s health system, advocating for their pivotal role improving the safety and quality of medicines use. Embedded in multidisciplinary medical teams and equipped with exceptional medicines management expertise, SHPA members are progressive advocates for clinical excellence, committed to evidence-based practice and passionate about patient care.

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