

Media release

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Equity, consistency and collaboration key to unleashing pharmacy workforce

The Society of Hospital Pharmacists of Australia (SHPA) has highlighted the need for a consistent, collaborative care approach that fully recognises the capabilities of the entire pharmacy workforce, including pharmacy technicians, in its recommendations to the <u>Unleashing the potential of our workforce</u> <u>— Scope of Practice Review</u>.

SHPA notes that having successfully demonstrated over several years the benefits of patient-centred collaborative pharmacist prescribing models, they are well positioned to provide insights into potential changes that will help unleash the pharmacy workforce across all practice settings.

SHPA President Tom Simpson says a nationally-consistent approach – supported by consistent funding models – that uses appropriately trained pharmacists and technicians working to their full scope, will go a long way to easing the already overburdened health system.

'Strengthening collaborative pharmacist prescribing roles is something <u>SHPA has long championed</u>, with the innovation highlighted as the <u>leading theme of *Pharmacy Forecast Australia 2023*</u>.

'These patient-centred programs have been safely and successfully <u>rolled out across Australian</u> <u>hospitals in the last ten years</u>, and we were pleased to showcase the model to Health Minister Mark Butler and Assistant Minister Emma McBride in July this year in a metropolitan and regional hospital respectively.

'Models such as Partnered Pharmacist Medication Charting (PPMC) have shown to be ten times safer for patients, who spend 10% less time in hospital as a result.

'If we implemented PPMC into all public and private hospitals, economic analyses and extrapolations suggest over two million bed days would be unleashed from the hospitals system for overnight admissions, with financial savings well into the billions.

'While these models are supported on a local and national level, additional funding is needed to resource sustainably across Australia and ensure consistency and reliability, such as through the <u>National PPMC Credential</u> SHPA established in July.

'Collaborative health care has been the cornerstone of hospital pharmacy practice for many years. We know it works, and we are excited to see these models starting to transfer from hospitals into primary care, such as the Tasmanian government's planned <u>adoption of PPMC in aged care</u>.'

Mr Simpson is hopeful the review will identify sustainable ways health professionals can work collaboratively to deliver care to patients when and where they need it.

'Good health policy should always be predicated on improved patient health outcomes.

'We have demonstrated the benefits of utilising pharmacy technicians to capture medication history upon hospital admission, reducing the time needed for this task by 25%, considerably freeing up capacity for the doctor and pharmacist to consult with the patient.

'We have seen the impact of the highly specialised and evidence-based care being delivered by GP Practice Pharmacists, which not only increases patient safety and satisfaction but increases the capacity of GPs to see more patients.

'In their roles at the centre of community-based care, GPs already issue referrals to off-site and on-site health disciplines such as physiotherapy for their specialised expertise.

'Incorporating pharmacist expertise into the primary care treatment team has been shown to improve therapeutic outcomes, patient understanding of medications, reduced adverse reactions, and free up time for GPs to diagnose and treat more patients.

'GP-clinic pharmacists now work in GP clinics across Australia, undertaking comprehensive medication history and screening prior to starting new treatments. They support team-based prescribing under treat-to-target pathways, allowing GPs to establish treatment goals whilst pharmacists optimise medications and dosing.'

Mr Simpson says access to GP-clinic pharmacists is limited by the lack of funding for non-dispensing pharmacy services.

'It is essential that funding models embrace the opportunities and benefits of embedding pharmacists into team-based care models. This will enable better care, for more people, from clinicians working together in the best interest of the patient.'

'If we can continue to build the capacity of our health system by expanding the role of pharmacists to deliver in other areas – as well as shoring up funding for core roles like clinical interventions, deprescribing, and counselling – we will unleash a far more efficient health system that can only mean better care for Australians.'

Key SHPA recommendations include:

- All state and territory governments should amend legislation in a nationally consistent manner, to recognise credentialed pharmacists as prescribers when working in collaborative prescribing arrangements with medical practitioners.
- Pharmacists should be granted authorisation to write a prescription for the supply of a pharmaceutical benefit under the National Health Act, to enable equitable and affordable access to medications prescribed by credentialed pharmacists through collaborative prescribing arrangements.
- Funding models should incentivise collaborative team-based care, recognising that all healthcare should be collaborative to achieve best possible patient health outcomes.
- Funding models should incentivise pharmacists to perform core quality use of medicines activities, including clinical interventions, deprescribing and counselling, which are the most value-adding components of pharmacy services.
- Pharmacy technicians should undertake technician-led dispensing and supply of medications (including PBS-funded medications) in all pharmacy settings, to allow pharmacists to perform high-value patient-facing clinical roles which will support the safe and quality use of medications whilst alleviating pressures on the primary healthcare system.
- All state and territory governments should amend legislation in a nationally consistent manner to enable pharmacy technicians to undertake technician-led medication dispensing and supply models.

Full access to SHPA's recommendations for the <u>Unleashing the potential of our workforce - Scope of</u> Practice Review is available on SHPA's website.

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About SHPA

The Society of Hospital Pharmacists of Australia (SHPA) is the national, professional organisation for the 6,100+ Hospital Pharmacists, and their Hospital Pharmacist Intern and Hospital Pharmacy Technician colleagues 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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