

## SHPA response to ODT Program Factsheets and Community Pharmacy Program Rules, June 2023

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.

SHPA welcomes the opportunity to provide feedback on the *ODT Program Factsheets and Community Pharmacy Program Rules*. SHPA members of the Pain Management, Emergency Medicine, Mental Health, and Dispensing and Distribution Speciality Practice Groups who regularly support patients on ODT programs, have provided input into this submission.

While the majority of opioid dependence treatment (ODT) programs are delivered in the community setting, SHPA members are regularly involved in the provision of ODT medicines to inpatients and safely transitioning patients taking part in these programs into hospital from the community, and back into the community post-discharge. Public hospital pharmacists are also involved in supporting public Alcohol and Other Drug (AOD) clinics and prisons in the delivery of this program. They provide expert advice about the management of complex ODT patients to both prescribers and nurses, as well as deliver direct patient care for people with substance use issues including those on methadone/buprenorphine treatment and Long-Acting Injectable Buprenorphine (LAIB) treatment programs.

SHPA has previously made a submission to the <u>Post-market Review of Opiate Dependence Treatment Program Medicines</u> in 2021, advocating for appropriately funded clinical pharmacy services required in delivering an ODT program to, at a minimum, facilitate cost-recovery for both hospital and community pharmacists. Hospitals do not have capacity to dedicate resources from their already overstretched workforces to deliver ODT programs to patients who are displaced from their community pharmacies, nor to manage an increase in emergency department (ED) presentations of patients experiencing withdrawals.

Therefore, it is important that the proposed funding continues to incentivise community pharmacies to deliver this valuable service. Fundamentally, patients participating in ODT programs are best and more appropriately managed in the community, and it would be a retrograde step to send them back to the hospital setting.

## **Feedback on Factsheets**

Overall, SHPA members report that the ODT Program Factsheets adequately outline the funding arrangements. However, the 'ODT Community Pharmacy Program Rules' document regarding consumer information and consent documents is not written in a health literate style that would be clear to all consumers accessing the ODT program.

It is also unclear to SHPA what the claiming requirements for missed doses are or in situations where patients don't continue to collect doses for the remainder of the month, for example where they may move collections to another pharmacy mid-way through the month.

Further consultation with the community and hospital pharmacy sectors is required to ensure ongoing sustainability and equitable access to treatment for all patients.

If you have any queries or would like to discuss our submission further, please do not hesitate to contact Jerry Yik, Head of Policy and Advocacy on <a href="mailto:jyik@shpa.org.au">jyik@shpa.org.au</a> .