

Role of community pharmacy-Parliamentary Inquiry



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About the Pharmacy Guild of Australia

- Founded in 1928
- Leading industry body for community pharmacy
- Aim to maintain community pharmacies as one of the most appropriate providers of health care
- Over 80% of pharmacies are members
- Leader in developing and implementing community pharmacy based; harm minimisation strategies, quality assurance programs and professional service referral and recording tools



About community pharmacy

- A network of over 5,000 pharmacies around Australia and approximately 1,300 in Victoria (regulated by the Pharmacy Regulation Act administered by the Victorian Pharmacy Authority)
 - Privately funded infrastructure an example of a successful public-private partnership
- Pharmacists consistently rank highly in; trusted professionals, satisfaction rating for health services, confidence in using the service in future

(Roy Morgan, Menzies Centre for Health Policy, PwC 5CPA research study - respectively)



About community pharmacy

- Most visited primary healthcare destination in Australia (all supervised by a registered pharmacist)
- Capacity for pharmacists to offer access to a range of non-prescription medicines, health related products and professional services
- Community pharmacy is: <u>Accessible</u>,
 <u>Trusted</u> and comes with <u>High satisfaction</u>



Community Pharmacy-Health destination





The Pharmacy Guild of Australia

We welcome the inquiry into community pharmacy

- Underutilisation in a workforce that has capacity (workforce supply meeting demand) — HWA Pharmacist in Focus March 2014
- Reduce burden on broader health system to reduce hospital admissions (and readmissions) through; early detection, preventative health and prevention of adverse events from medicine use

Preventable costs to the system

- Between 2-3% of hospital admissions are associated with the occurrence of an adverse medicine event;
- This accounts for an estimated 230,000
 hospital admissions per year with costs to
 the health system estimated at \$1.2bn,
 with half of these events considered to be
 avoidable.
- Australian Commission on Safety and Quality in Healthcare (2013),



Roles + opportunities for an expanded role in primary, preventative care

- 1. Pharmacist Immunisation (focusing on adult influenza immunisation initially);
- 2. Medication management services;
- 3. Screening and risk assessment;



Pharmacist immunisation, the international experience



- Pharmacist immunisation is well accepted in USA, UK, Ireland, NZ & Canada
- International evidence indicates pharmacist administered vaccines is associated with:
 - Increased vaccine uptake
 - Decreased disease burden
 - Positive economic benefits
- Increased vaccine uptake is in addition to vaccines administered by other providers (not instead of)
- No evidence of increased anaphylaxis or adverse events



In-Pharmacy Immunisation Services

Community pharmacy is involved in vaccine distribution, advocacy and immunisation services

- ➤ Vaccine distribution the traditional role of pharmacies
- ➤ Immunisation advocacy opportunity to enhance
- Nurse-led immunisation services
 - ➤ Priceline pharmacies 110 nurse-led influenza clinics in 2011 Survey (n=2,830) – 40% of people no previous influenza vaccine⁽¹⁾
 - ➤ Terry White pharmacies⁽²⁾:
 - 4,100 people vaccinated in 2011
 - 6,650 people vaccinated in 2012
 - >16,000 people vaccinated in 2013

Next step – in-pharmacy pharmacist immunisation

(1) Australian Pharmacist – April 2012(2) AJP Dec 2013



Community Pharmacy – Providing Opportunities

- ➤ There are 5,350 community pharmacies in Australia providing an infrastructure that is unparalleled in any other part of the health system
 - > 20% are in rural and remote locations
 - Extended trading hours evenings, weekends, public holidays
- > 94% of community pharmacies are QCPP accredited
- Opportunity to engage people
 - Full health spectrum unwell and well
 - People that do not use other health services
 - > Young people
 - People who do not get immunized



Current Developments

- ➤ Legislation Change
 - Changes have been made in NT influenza and measles
- ➤ Queensland trial⁽¹⁾
 - Joint trial by Pharmacy Guild (QLD) & PSA (QLD)
 - Working with QUT & JCU to ensure outcomes are of the highest standard
 - 80 pharmacies participating
 - Over 10,000 immunisations (as of 25th June 2014)
 - 25% are 'walk-ins'
 - Convenience and access identified benefits
 - No significant adverse reactions reported to date



In-pharmacy Pharmacist Immunisation

Infrastructure

- ✓ more than 50% have a private consulting room or screened-off area
- ✓ all have cold-chain processes
- √ access to adrenaline if required

IT enablement

- ✓ first profession to achieve computerisation across its network
- ✓ already enabled to participate in the Personally Controlled Electronic Health Record
- √ facilitate surveillance and recording
- ✓ Direct reporting to TGA for adverse reactions (first profession to streamline reporting)

Professional Support

- ✓ Revised QCPP
- ✓ Professional Guidelines
- ✓ Training



Professional Support

- ➤ Pharmacy Board of Australia recognised within scope of practice (board mandated to protect the public)
- QCPP being amended to cover both pharmacist-led and nurseled in-pharmacy immunisation services
 - ➤ ETA June 2014
- Professional Guidelines being amended to cover both pharmacist-led and nurse-led in-pharmacy immunisation services
 - ➤ ETA June/July 2014
- Pharmacist training consistent with training standards for other immunisers





Medication Management & other initiatives

- Post-acute health care
 - E.g. Post Discharge medication reconciliation;
- Aged care in the home
 - E.g. 'Medical Home', Dose Administration Aid (DAA) services
- Harm minimisation
 - Opioid Replacement Therapy;
 - Needle and Syringe Programs.
- Minor Ailments scheme
 - Reduce burden on GP's to focus on more complex medical problems;
 - Up to 15% of all GP appointments involving a minor ailment that could have been dealt with elsewhere in primary care system



Prevention and early identification

- Screening and risk assessment
 - Cardiovascular
 - Diabetes
 - Bowel cancer
 - Respiratory (COPD)

Pharmacy is an accessible and trusted destination that can screen for conditions that have preventable risk factors



Conclusion

- Many thanks to the Committee for the invitation
- Community pharmacy can play a major role in improving health outcomes for the Victorian community
- The Guild is ready to work with the government to develop and implement evidence-based and cost-effective programs

