

28 April 2023

Andrew Barr MLA
ACT Chief Minister and Treasurer
GPO Box 1020
Canberra ACT 2601

Email: budgetconsultation@act.gov.au

Dear Chief Minister,

The Pharmaceutical Society of Australia (PSA) commends the ACT Government on successfully navigating the many health challenges that have emerged over the course of the COVID-19 pandemic. As medicine safety experts and one of the most accessible frontline health workforces, pharmacists can play a greater role in improving access to medicines and health care for the ACT population and individual patients to enable better health outcomes for the Territory.

PSA would like to thank the ACT Government for the opportunity to provide a submission for the 2023-24 Budget consultation process. PSA has identified four key proposals for consideration:

- **Build on the skills and expertise of ACT pharmacists to administer medicines by injection, including an expanded range of vaccines**
PSA calls on the ACT Government to make the regulatory changes necessary to provide ACT pharmacists with the ability to initiate and administer all vaccines to all recommended age groups, covering National Immunisation Program and Australian Immunisation Handbook recommendations.
- **Safeguard Canberrans' access to essential medicines by expanding continued dispensing arrangements**
The current Pharmaceutical Benefits Scheme (PBS) Continued Dispensing arrangements are not fit for emergency purpose, as they do not include many medicines where continuation of therapy is paramount in managing the health condition. Allowing all Schedule 4 medicines to be eligible for continued dispensing on a permanent basis would safeguard Canberrans' access to their essential medicines without a prescription through pharmacies under specified conditions.
- **Support and equip ACT pharmacists and their staff to recognise, respond and refer people impacted by domestic and family violence**
As highly accessible frontline health professionals, ACT community pharmacists are well placed to help tackle domestic and family violence in Canberra. PSA seeks investment in training for pharmacists and their staff to equip them with essential skills and knowledge to recognise, respond and refer people impacted by domestic and family violence to suitable support within the community.

- **Improve transitions of care for patients by becoming a signatory to a Pharmaceutical Reform Agreement with the Commonwealth**

PSA calls for the ACT to align with other jurisdictions to enable the provision of PBS-subsidised medicines to patients discharged from hospital by signing a Pharmaceutical Reform Agreement with the Commonwealth.

The PSA ACT Branch thanks the Government for its willingness to consider measures which reduce barriers to pharmacists practising to full-scope in support of the health of Canberrans. Emergency departments and general practices are being stretched beyond their capacity, and it is imperative to find new ways to support access to acute primary care.

The PSA ACT Branch commends the Government on the recent expansion in pharmacist scope of practice in the ACT. Through the addition of more vaccines to the ACT Pharmacist Vaccination Standard, this improves access for Canberrans and reduces pressure on general practices and emergency departments.

The PSA ACT Branch also commends the government on the announcement that a number of ACT sites that will participate in the NSW UTI pharmacist prescribing trial and we are keen to work closely with the Government on this and future implementation developments.

This work should draw on experiences and models of best practice across not only Australian jurisdictions, but internationally, learning from the innovative practices of pharmacists in countries including the United Kingdom and Canada.

PSA appreciates your consideration of the ways in which our pharmacist workforce can be increasingly utilised to support the health and wellbeing of Canberrans.

We are happy for this submission to be made public. Please do not hesitate to contact PSA if you require any further information to support this submission.

Sincerely,



Olivia Collenette BSc MPharm MPS CDE
ACT Branch President
Pharmaceutical Society of Australia

About PSA

PSA is the only Australian Government-recognised peak national professional pharmacy organisation representing all of Australia's 36,000 pharmacists working in all sectors and across all locations.

PSA is committed to supporting pharmacists to help Australians access quality, safe, equitable, efficient and effective healthcare. PSA believes the expertise of pharmacists can be better utilised to address the healthcare needs of all Australians.

PSA works to identify, unlock, and advance opportunities for pharmacists to realise their full potential, to be appropriately recognised and remunerated.

PSA has a strong and engaged membership base that provides high-quality healthcare and are the custodians for safe and effective medicine use for the Australian community.

PSA leads and supports innovative and evidence-based healthcare service delivery by pharmacists. PSA provides high-quality practitioner development and practice support to pharmacists and is the custodian of the professional practice standards and guidelines to ensure quality and integrity in the practice of pharmacy.

Pharmacists in the ACT

In the ACT, there are currently 720 registered pharmacists practising in community pharmacies, hospitals, general practices, aged care facilities, Aboriginal health services, ACT and Commonwealth Government departments and agencies, the military, academic institutions, and other private sector organisations.

Throughout the COVID-19 pandemic, many of these pharmacists have worked on the front line. Those working in ACT community pharmacies have kept the doors open, providing access to essential medicines and primary care. Further, they have skilfully managed supply limits on certain medicines, helped patients navigate medicines shortages, supported the unprecedented demand for rapid antigen tests and most recently facilitated access to COVID antiviral medications ensuring that they are being prescribed and taken in a timely, safe and appropriate manner.

ACT pharmacists have also successfully expanded vaccination services during the COVID-19 vaccine rollout. They have been integral in contributing to the territory's world-leading vaccination rates, having administered over 230,000 COVID-19 vaccine doses to Canberrans as of 27 March 2023.

The average Australian sees a community pharmacist 18 times a year. This accessibility and experience have highlighted the opportunity and benefit of pharmacists working at their full potential. It has also revealed an imperative for improved coordination and resources to best utilise pharmacists as part of the Territory's health system.

RECOMMENDATION 1

Build on the skills and expertise of ACT pharmacists to administer all recommended vaccines, for all ages

PSA recommends that the ACT Government:

- 1. Enables ability for pharmacists to initiate and administer all recommended vaccines for all eligible age groups to boost immunisation rates and reduce the incidence of vaccine preventable disease*
 - 2. Enables full access to all National Immunisation Program-funded vaccines for all eligible age groups through pharmacists to support uptake of the National Immunisation Program*
-

The challenge

Patients can only access a selected number of vaccines from pharmacists and apart from influenza, no other National Immunisation Program vaccine. This is creating unnecessary barriers in terms of the full range of Australian Immunisation Handbook recommend vaccinations to people living in the ACT. The restriction of National Immunisation Program vaccines creates cost barriers for the most vulnerable by having to pay full out of pocket costs.

Children under 5 cannot received an immunisation from a pharmacist in the ACT, despite pharmacists being trained to do so and other allowed in other jurisdictions. This reduces the opportunity for true family centred care in pharmacies and leaves pharmacists unable to support vaccine uptake in those under 5.

The proposed approach

Enable pharmacists to administer all vaccines to all ages recommended by the Australian Immunisation Handbook by updating ACT Pharmacist Vaccination Standard.

Distribute NIP vaccines to ACT community pharmacies via the current logistic arrangements in place throughout the year for other NIP providers. This is an established distribution channel which already services community pharmacies across the ACT through the supply of seasonal NIP influenza vaccines.

Why it will work

In Australia, pharmacists have been administering vaccinations since 2014 and have administered over 10 million COVID vaccines since the rollout began. Pharmacists, as established advocates for and qualified providers of vaccinations, have a significant role to play in promoting and supporting the uptake of vaccination.

The well-established, well-distributed network of community pharmacies in the ACT, many of which operate extended trading hours, provides a highly accessible and convenient location to expand and increase patient access to vaccinations.

By improving vaccination rates, pharmacists can help to ease pressure on ACT general practices, hospital emergency departments, walk-in centres and other ACT health facilities; places that can become overcrowded during serious outbreaks.

Budget implications

Making the necessary regulatory changes for administration of medicines via injection requires nil direct investment from the ACT Government.

The costs of NIP-subsidised vaccines are already accounted for in state and federal budgets based on eligibility criteria and population data. This means a marginal cost is involved in the logistical reallocation and distribution of NIP vaccines to an increased number of providers.

Benefits for Canberrans

- Equitable access to vaccines and decreased pressure on general practitioners and emergency departments.
 - Increased vaccination rates and reduced burden of vaccine preventable diseases.
 - Improve access to vaccination for Canberra families.
 - Reduce hospital presentations by improving day-to-day management of chronic health conditions with regular oversight by a healthcare professional.
-

RECOMMENDATION 2

Safeguard Canberrans' access to essential medicines by expanding continued dispensing arrangements

PSA recommends that the ACT Government allows all Schedule 4 medicines to be eligible for continued dispensing on a permanent basis.

The challenge

Continued Dispensing is the supply of an eligible medicine to a person by an approved pharmacist, where there is an immediate need for the medicine, but the PBS prescriber is unable to be contacted and/or is unable to provide an electronic PBS prescription or owing prescription.

Continued Dispensing enables community pharmacists to supply a single standard pack of an eligible medicine to a patient at the usual PBS price. The patient must have been supplied the medicine in the previous three months (and their condition is stable) and the medicine must not have been supplied under Continued Dispensing arrangements by any pharmacy within the previous 12-month period.

Continued Dispensing arrangements were first introduced by the Commonwealth Government through the National Health (Continued Dispensing) Determination 2012, which allowed for the supply of two medicine groups – oral contraceptives and statins (cholesterol-lowering medicines).

In response to the 2019-20 bushfire emergencies across Queensland and New South Wales, the Commonwealth Government temporarily expanded the range of medicines that could be supplied under Continued Dispensing arrangements to include all PBS General Schedule (s85) medicines through the National Health (Continued Dispensing – Emergency Measures) Determination 2020. The emergency measures were extended several times to assist in managing demand on the health system during the COVID-19 pandemic. This was vital in ensuring patient access to more than 900 Schedule 4 (Prescription Only) medicines in an emergency.

From 1 July 2022, changes were made to the Commonwealth Government's Continued Dispensing arrangements, reducing the number of medicines from over 900, to 168. This has had a substantial impact on patient access to essential medicines.

Although the reduced number of medicines have been declared as eligible for Continued Dispensing on a permanent and ongoing basis, PSA has serious concerns that the arrangements are not fit for emergency purpose. This is because the list does not include many medicines where continuation of therapy is paramount in managing the health condition. These are medicines that could have serious patient safety implications if ceased abruptly.

Examples of such classes of medicines which are not on the list of eligible medicines for the Commonwealth Government's permanent Continued Dispensing arrangement include the following:

- antiepileptics
- antidepressants

- antipsychotics
- antithrombotic agents
- antirheumatic agents
- anti-Parkinson medicines
- antiglaucoma preparations
- chronic antibiotic use, in conditions such as cystic fibrosis
- immunosuppressants.

PSA contends that being selective about which class of PBS medicine qualifies for emergency supply has the potential to compromise patient care through the discontinuation of essential prescribed medicines. It is contrary to the fundamental objective of the PBS to provide timely, reliable, and affordable access to necessary medicines for all Australians under one of the aims of the National Medicines Policy.

The proposed approach

PSA calls on the ACT Government to allow all Schedule 4 medicines to be eligible for continued dispensing (i.e. provision of the medicine without a prescription by the pharmacist) on a permanent basis. This is vital to ensuring timely and equitable access to basic health care in the event of an emergency, consistent with a fundamental policy intent of the PBS.

PSA suggests criteria for access to continued dispensing supply, such as limiting to one such supply in a 12-month period and considering other ACT emergency supply provisions, first be maintained.

This is a similar approach to that taken last month by the Tasmanian Government which expanded the range of medicines that can be provided by a pharmacist through continued dispensing to a patient without a prescription in specified circumstances. The increased range of medicines includes those not eligible for the Commonwealth Government's PBS Continued Dispensing arrangements, such as those classes of medicines listed above.

Why it will work

The Commonwealth Government's temporary emergency measure of expanded Continued Dispensing was in place for more than two years and operated very successfully throughout that period in facilitating appropriate supply of medicines.

The ability of a pharmacist to employ continued dispensing provisions to support continuity of patient care is paramount in the current and future healthcare environment considering the increasing frequency of natural disasters, the ongoing effects of the COVID-19 pandemic and other public health emergencies, as well as national general practitioner shortages.

Budget implications

There is not expected to be any significant cost to the ACT Government for this measure as some medicines will be eligible under the Commonwealth Government Continued Dispensing arrangement and others will be private items (user pays).

By way of reference, the Continued Dispensing emergency measures did not result in any increase in overall PBS utilisation or expenditure. This is because the patient is continuing prescribed therapy and is generally seeking supply when their medicine has run out or cannot be sourced due to an emergency.

Benefits for Canberrans

- Improved access to medicines for Australians when facing emergency situations.
 - Improved patient care through continuation of essential prescribed medicines.
 - Avoiding costs of health care that may arise from abrupt cessation of an essential medicine.
-

RECOMMENDATION 3

Support and equip ACT pharmacists and their staff to recognise, respond and refer people impacted by domestic and family violence

PSA recommends that the ACT Government supports and equips ACT pharmacists and their staff with the skills and knowledge required to recognise, respond and refer people impacted by domestic and family violence. By training pharmacists and pharmacy staff, they can serve as a significant first point of contact, increasing community access to a suitably trained frontline workforce.

The challenge

Family, domestic and sexual violence is a major health and welfare issue in Australia occurring across all socioeconomic and demographic groups, but predominantly affecting women and children. It affects all people, irrespective of economic, educational, social, geographic, or racial background, resulting in significant morbidity and mortality.

Family and domestic violence is inextricably enmeshed with a subset of broader social and public health issues which are also of interest to the community at large. Considering the current economic instability and uncertainty, stressors and pressure on families are likely to increase substantially in the short term. Implementing this type of intervention within the coming months would present an astute opportunity for proactive intervention by the Government to prevent further community impact. Housing stress, financial insecurity, mental and physical illness, addiction, trauma and grief are all reciprocal risk factors commonly precipitating family conflict and domestic violence. These matters are exceptionally delicate in nature. This means it is crucial for pharmacists who are entrusted to engage with individuals seeking assistance to resolve these issues, possess insight into the interplay between any combination of social issues and any subsequent impact on the outcomes and wellbeing of individual family members and the family unit.

The proposed approach

Several major ACT reviews into responses to domestic and family violence have recommended training for all frontline workers. Training was identified as a way to develop a shared understanding of domestic and family violence, and to provide more consistent and relevant delivery of services. In response, the ACT Government committed to developing a skilled and educated workforce equipped to recognise and respond to the needs of people experiencing domestic and family violence.

Pharmacists, as one of the most accessible healthcare workforces, are well-placed to assist in recognising and responding to this need. PSA is confident that pharmacists can offer an important opportunity to reach people who are affected by domestic and family violence, to provide support, and to help them to take steps to secure their safety and refer to suitable support within the community. With appropriately trained staff available to support, these pharmacies can serve as a significant first point of contact for assessing and responding to incidences of domestic and family violence. Pharmacists maintain a consistent community presence and can establish and maintain enduring connections with a variety of stakeholders within the community throughout the course of practice. Specialised training in this area will complement and expand the existing capabilities of pharmacists, creating an additional trusted first point of contact.

Increasing contact points within the community decreases barriers to assistance, improves access to a suitably trained frontline workforce and relieves systemic pressures on the overarching healthcare system. Provision of visible support within the community also serves as an opportunity for informal proactive engagement and communication, increases public confidence and awareness of the issue, and reaffirms the collective commitment toward overcoming the complex challenges associated with family and domestic violence in the ACT.

PSA believes the ACT Government can partner with pharmacists to expand the ACT Government Domestic and Family Violence Training Strategy. COVID-19 has changed our sector and has reminded the public how important pharmacists are in being the most readily accessible health professionals to the public.

Training could be offered in partnership with PSA, as the only Australian Government-recognised peak national professional pharmacy organisation. PSA has a significant, well-established track record in developing and delivering a wide range of training programs for pharmacists and their staff.

PSA can coordinate, develop and deliver Domestic and Family Violence Training to pharmacists, pharmacy assistants and other pharmacy staff who are likely to be the first point of contact for consumers. Managers and supervisors in these community pharmacies can also be trained to support the wellbeing and resilience of employees.

Why it will work

Domestic and family violence is a complex pattern of behaviours that may include social isolation and financial deprivation, in addition to physical acts of violence, sexual abuse and emotional abuse.

In spite of the lack of agreement on definitions, domestic and family violence is clearly a very common, hidden problem for many patients attending clinical practice. Frontline workers, such as pharmacists are well-placed to raise awareness of the many potential indicators of domestic and family violence and to engage with affected individuals in an empathic, non-judgemental way.

Many community pharmacies also have private consulting rooms available. PSA is aware of instances in which community pharmacies have assisted frontline domestic violence services by providing a discreet meeting place for victims.

At an individual level, domestic and family violence can cause physical and emotional ill health; the underlying abuse needs to be recognised and dealt with directly if women and their children are to be safe. Domestic and family violence is clearly a significant public health problem that all clinicians need to be aware of to enable them to act as advocates for their patients.

PSA believes that training pharmacists to recognise, respond and refer suspected cases of domestic and family violence will provide another valuable pathway for victims of domestic and family violence to access the help that they need.

A similar training program was developed by the Western Australian branch of PSA in collaboration with the Curtin University Project Research team, Preventing Violence Against Women and Lifeline. At the conclusion of the project, the consensus among health professionals who participated was that the program significantly improved awareness of and confidence in handling family and domestic violence related issues in practice. The post training survey outcomes supported this, with over 90% of participants indicating their knowledge in this area improved substantially after completing the training.

Budget implications

This recommendation requires \$150,000 to coordinate Domestic Violence Response Training for pharmacists and pharmacy staff in the ACT.

Benefits for Canberrans

- Increased access to a suitably skilled frontline workforce, trained in skills and knowledge required to recognise family and domestic violence.
 - Recognise, respond and refer people who are impacted by family and domestic violence.
 - Provide a safe, respectful and accessible point of contact and pathway for people who are experiencing domestic and family violence to seek appropriate support services.
-

RECOMMENDATION 4

Improve the continuum of care for Canberrans discharged from hospital through the ACT Government becoming a signatory to a Pharmaceutical Reform Agreement with the Commonwealth Government

PSA recommends that the ACT Government aligns the ACT hospital sector with other Australian jurisdictions to enable the provision of pharmaceutical benefits to eligible patients by becoming a signatory to a Pharmaceutical Reform Agreement with the Commonwealth.

The challenge

The Australian Government has bilateral Pharmaceutical Reform Agreements (PRAs) enabling public hospitals to dispense Pharmaceutical Benefits Scheme (PBS) general schedule (section 85) medicines, chemotherapy medicines and highly specialised drugs to day-admitted patients, outpatients and patients upon discharge. These PRAs were signed progressively by all states and territories, except for the ACT and NSW, between 2001 and 2010.

Public hospitals in the jurisdictions that are signatories to the PRAs must adopt guidelines to ensure continuity of medication management between the hospital and the community. These guidelines and the guiding principles they are built on are intended to support Quality Use of Medicines (QUM) across the continuum and are consistent with the QUM objective of Australia's National Medicines Policy.

The main objective of these agreements and the guiding principles is to improve equity of access to medicines irrespective of geographical location, as well as the quality use of medicines through increased access to clinical pharmacists and pharmacy services. A critical component is enabling hospitals to access the PBS to prescribe and dispense up to 28 days of medicines upon patient discharge.

Patients currently receive between 2 to 7 days of medicines in the ACT upon discharge. This shortcoming can lead to poor transition of care between the hospital setting and the community and is evident with discharged patients contacting hospitals for further supply of their medications due to the inability to access their general practitioner in time. This places additional workload on an already strained hospital workforce and health system, and can result in delayed discharge for patients resulting in longer than necessary stays as inpatients.

In the ACT, the situation is further exacerbated by the lowest bulk-billing rate in the country, which is currently 76.5%, well below the national average of 80.3%. A report commissioned by PSA in 2019 revealed that 250,000 hospital admissions a year result from medicine-related problems in Australia. The annual cost of these admissions is \$1.4 billion, yet 50% of this harm is preventable. This burden of harm is felt in the ACT, as it is throughout Australia.

PSA supports and has long called for the signing of a PRA for ACT public hospitals. We firmly believe that Canberrans receiving a standard PBS quantity of medicines upon discharge from hospital will support safer, more effective transitions of care, improve the quality use of medicines, and reduce hospital re-admissions and emergency department presentations.

The proposed approach

PSA calls on the ACT Government to become a signatory to a Pharmaceutical Reform Agreement with the Commonwealth immediately, or as part of the anticipated renegotiation of the next National Health Reform Agreement.

Why it will work

In addition to enhancing patient health outcomes, the signing of a PRA can generate revenue for the ACT Government, the reinvestment of which could cover the implementation of quality use of medicine and medicines safety initiatives within the ACT public hospital system. PSA understands that the quantum of this revenue has been modelled previously by ACT Health.

In other jurisdictions, this reinvestment has led to initiatives such as the provision of specialised pharmacy services in oncology, emergency medicine, palliative care, geriatric medicine, and hospital in the home. Providing or improving access to these services is important in ensuring that Canberrans have the same access to clinical pharmacy services available to patients in other parts of the country.

Budget implications

This recommendation requires **nil direct investment** from the ACT Government, and it is anticipated that it will deliver a significant revenue source to the Territory.

Benefits for Canberrans

- Enhanced patient care upon discharge from hospital, potentially reducing re-admissions and emergency department presentations.
 - A PRA will deliver an additional revenue source for ACT public hospitals with prescriptions dispensed under the PBS, attracting various fees, including administration and handling charges.
 - In other jurisdictions, the reinvestment of this revenue has led to the piloting of innovative opportunities for enhancing the quality use of medicines, thereby further enhancing patient care.
-