



**The Pharmacy
Guild of Australia**

**ACT Legislative
Assembly Standing
Committee on
Health, Community
and Social Services**

**Inquiry into Access
to Primary Health
Care Services in the
ACT (June 2009)**

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EXECUTIVE SUMMARY

The ACT Branch of the Pharmacy Guild of Australia welcomes the opportunity to provide input to the ACT Legislative Assembly's Standing Committee on Health, Community and Social Services inquiry into access to primary health care services.

Community pharmacy currently plays a vital role in the provision of primary health care services in the ACT.

With a network of some 61 pharmacies across the Territory, community pharmacy is one of the most accessible health services. It is staffed by highly trained pharmacists who are one of the most trusted of all health professionals. Those pharmacists are assisted by a trained workforce of pharmacy assistants.

The Guild believes that the key solution to relieving the pressure on doctor availability is to make better use of our existing resources, particularly community pharmacies – not to create another drain on scarce health funds and facilities.

Pharmacist advice and the dispensing of pharmacy medicines or pharmacist-only medicines are an effective use of scarce health resources, with all necessary checks and balances, and with no burden on the health system and no patient out-of-pocket expense for a consultation.

In recent years, pharmacists have demonstrated their ability and willingness to expand their role to include illness prevention and primary health care functions. They are keen to work in partnership with other health care providers in order to deliver accessible, integrated, safe and effective care to the community.

Community pharmacy is poised to assume an enhanced role in primary health care. With increased recognition that a primary health care system should be centred on the patient, the accessibility of community pharmacy builds strength in its case. Community pharmacists are the most accessible of all health professionals via this network.

In this submission, the Guild has put forward a number of suggestions that would lead to an enhanced role for community pharmacy, and help to achieve a fiscally sustainable, efficient and cost effective health care system.

For funders of health services, there are significant savings to be gained by fully utilising the existing pharmacy infrastructure and harnessing the under-utilised capacity of the pharmacy workforce to support the provision of effective and efficient health services.

The ACT Branch of the Pharmacy Guild and community pharmacy in the ACT wishes to work positively with the ACT Government, GPs and other health care providers in improving the health of the ACT community. We want to work collaboratively with Government at all levels to explore appropriate options for addressing the challenges of an ageing population; the increasing pressure being placed on emergency departments in public hospitals; and developing initiatives for addressing current GP and nurse shortages.

INTRODUCTION

This submission responds to the invitation by the Chair of the ACT Legislative Assembly's Standing Committee on Health, Community and Social Services, to provide written comment in respect of the Inquiry that the Committee is undertaking into access to primary health care services in the ACT.

While it is noted that the Terms of Reference for the Inquiry cover a broad range of issues including GP clinic closures in the ACT since 2001 and strategies to attract and retain GPs in suburban Territory clinics, this submission focuses very much on how allied health professionals, particularly pharmacists, can play a key role in providing primary health care services to meet the increasing health needs of the community in the context of a shrinking supply of general practitioners.

ABOUT US

The Pharmacy Guild of Australia (The Guild) is an employers' organisation servicing the needs of independent community pharmacies. It exists for the protection and betterment of its members and to maintain community pharmacies as the most appropriate primary providers of health care to the community through optimum therapeutic use of drugs, drug management and related services.

The ACT Branch of the Guild operates within the framework of the Guild's national constitution. The Branch Committee, led by the ACT Branch President, is elected by Guild members through a process facilitated by the Australian Electoral Commission. The Branch Committee is supported by the ACT Branch Director and the staff of the ACT Branch office.

OVERVIEW

Pharmacy in Australia

Community pharmacy plays a vital role in the provision of health care services in Australia. With its network of over 5000 pharmacies in urban, regional and rural communities throughout Australia, and its highly trained workforce, community pharmacy is the most accessible of all health services and is well placed to play a constructive and dynamic role in the provision of effective primary health care.

Community pharmacists currently provide an array of services, which extend well beyond the dispensary and as such, pharmacies are more often than not the first contact point of the primary health care system for many people. These services also include:

- Provision of up to date and locally relevant information on other health care services and resources.
- Participation in community health, preventative health and other public health services.
- Distribution of public health information and educational materials.
- Referral to a General Practitioner or Hospital Emergency Services.
- Referral to other appropriate allied health professionals where required such as community health nurses, mental health services, drug and alcohol rehabilitation facilities and the like.

Pharmacy in the ACT

At the ACT level, community pharmacies provide an accessible, Territory wide, professional, primary health care service to all Canberrans. They offer a unique resource in primary health care providing quality advice and service from a health care professional. Community pharmacies are computerised and exist in a well located network of shop fronts in highly accessible locations across the Territory. Given Canberra's 'neighbourhood focussed' planning regime, and the location of pharmacies in local, group and town centres, a significant number of ACT residents are in close walking distance to their local community pharmacy.

In the ACT there are 61 pharmacies that not only dispense and give advice about medicines, but who assist in the delivery of health services in a variety of other ways. The majority of these pharmacies are open Monday to Saturday, with many open on Sundays and Public Holidays as well. Most are open until 7pm weekdays, and a number stay open until 11pm. One Canberra central pharmacy operates 365 days per year. This ensures that the community has an optimal level of convenience and access to professional advice, pharmaceutical and health care products, prescriptions, aids and services, after hours and in emergency situations.

Highly skilled, public confidence

Pharmacists are one of the most trusted health care professionals in Australia¹ and are immediately accessible. Pharmacists are the only health professional a person can see/seek advice from without an appointment. Community pharmacies must always have a pharmacist present during opening hours. This is a key point of difference with other health professional businesses. Pharmacists are equipped to not only dispense and give advice about medicines, but also to assist in the delivery of health services in a variety of other ways.

Pharmacists have completed a four-year academic course with an additional supervised registration year. Research undertaken by the Commonwealth Department of Health and Ageing² shows that no other health profession undertakes more study in medicines and therapeutics than pharmacists.

Recent workforce studies undertaken as part of the Commonwealth Government/Guild Community Pharmacy Agreement, suggests that the pharmacy profession, via the 16 university pharmacy schools in Australia, has significant capacity to ensure there is a pipeline of pharmacists to undertake current and future professional services.

Pharmacy Assistants

Pharmacists are ably supported by Pharmacy Assistants, who are the first point of contact for a consumer as they enter the pharmacy and are often required to provide advice on health related issues, referring where appropriate to the pharmacist for more in-depth counselling or advice.

¹ A Readers Digest June 2008 survey ranked pharmacists as the 5th most trusted profession, after ambulance officers, fire-fighters, pilots and nurses

² Department of Health and Ageing - Kim Bessell Principal Pharmacy Advisor Pharmaceutical Benefits Division presentation to NAPSA Congress Jan. 2009

A Pharmacy Assistant is more than a retail assistant. Most Pharmacy Assistants undertake detailed training in all aspects of community pharmacy practice and many undertake formal accredited training programs in specific health areas such as: smoking cessation; diet, nutrition and weight management; diabetes; blood pressure; women's and men's health; wound care; and asthma.

Triage Services Provided by Pharmacists

Triage is a service that has been provided by community pharmacists for many years, although it has not been recognised adequately by State, Territory or Commonwealth Governments. The Guild believes that it is essential that this role be recognised, and has recently commissioned a project to fully characterise the triage role of community pharmacists.

A survey conducted by the Pharmacy Guild³ showed that community pharmacists frequently refer consumers to other health care providers, particularly to general practitioners. The study showed the number of patients referred to a general practitioner each day ranged from 0-30. Pharmacists also referred people to other health practitioners including: child health nurses; community nurses; physiotherapists; dietitians; first aid stations; dentists; podiatrists; naturopaths; and sports medicine practitioners.

Links to Other Health Care Providers

It is acknowledged that there needs to be strong linkages between tertiary, primary and community based services if consumers with multiple and complex problems are to be afforded continuing and coordinated care, and the health professionals who care for them, are well informed of the patients' needs.

Community pharmacists maintain links with local general practitioners, and the Division of General Practice as part of their ongoing commitment to and participation in the local community and its primary health care.

It is noted that a Memorandum of Understanding has been signed between the Guild and the Australian General Practice Network.

Economic Considerations

Over \$12 billion of private capital is invested in community pharmacies across Australia in 'bricks and mortar' infrastructure. This ensures that the services provided by retail pharmacy benefit from the efficiencies inherent in the private sector, in delivering health care services. Pharmacists can deploy their capital and abilities in many different ways, depending on the needs of the government and the community, if given the opportunity and the incentives to do so.

The presence of community pharmacy infrastructure is a major cost saver to the health system through its role as primary health gate-keeper, assisting consumers with management of minor health complaints, or, when necessary, appropriate referrals to general practitioners or other health providers.

³ Evaluation of the Quality Care Pharmacy Program

The community pharmacy sector is uniquely positioned, compared to other health service providers, to deliver a range of services within the privately financed, commercial environment of the pharmacy, which is supported and paid for by small business pharmacy owners – unlike government proposals to establish new facilities, which will be borne by the taxpayer.

DISCUSSION

In a recent submission prepared by the Pharmacy Guild of Australia⁴ in response to the Commonwealth Government's Discussion Paper "*Towards a National Primary Health Care Strategy*", the Guild made a number of recommendations about enhancing the role of pharmacy in primary health care to assist to address the acute shortage of medical practitioners. Two proposals identified in the submission of particular relevance to the Assembly's current Inquiry are: 1) the Treatment of Minor Ailments Scheme; and 2) The Medication Continuance proposal, both of which are outlined below.

Treatment of Minor Ailments Scheme

Many people go to see their GPs as the first line of treatment for what are relatively minor ailments. These could be treated quickly, easily and far more cost-effectively by accessing a pharmacist in a community pharmacy. At the very least, people with minor ailments should be encouraged to see their community pharmacist in the first instance and the pharmacist can triage to the GP if appropriate.

Community pharmacy is already in the business of providing health and treatment advice for minor ailments such as coughs and colds, skin disorders, haemorrhoids, ear aches, aches and pains and the list goes on. Pharmacists are well qualified to carry out this function and have been trained to counsel and look out for symptoms which may indicate more serious conditions that warrant referral to a GP. There is scope however, to raise public awareness of and expand this role in an effort to make better use of pharmacists' skills, preserving the time of GPs to focus on treating more complex medical conditions.

A November 2008 study on the impact of minor ailments on GP workload provides a quantitative snapshot of this issue.⁵ The study, commissioned by the Australian Self Medication Industry (ASMI) and conducted by international health industry consultants, IMS, revealed that 15% of all GP consultations involve the treatment of minor ailments, and 7% involve the treatment of minor ailments alone. The study found that approximately 59% of minor ailments resulted in a prescription being written, with the remainder receiving varying degrees of over the counter medication recommendations. The findings demonstrate that significant GP resources are being devoted to conditions that could be effectively managed by a pharmacist and/or responsible self-care. While not formally costed in the study, ASMI estimates (based on \$30 per GP consultation) suggest a national annual cost of approximately \$750 million in GP visits alone.

A recent survey by the Nielsen Company found that 39% of Australians reported seeing a doctor as the first line of treatment for their most recent minor ailment.⁶ Of these, only 24% ended up

⁴ Pharmacy Guild of Australia; Submission in Response to the Commonwealth Government's Discussion Paper "*Towards a National Primary Health Care Strategy*"; Feb. 2009

⁵ IMS Study "Minor Ailment Workload in General Practice" presented at ASMI general conference, Nov. 2008

⁶ Doric K. Paper presented at The 2008 Australian Self Medication Association Conference, Nov. 2008

using a prescription medicine – including pensioners who are supplied with paracetamol through the PBS.

The same survey found that 71% of those surveyed answered ‘yes’ to the question ‘are you willing to use a pharmacist as the first point of contact for your health concerns’.

These visits for minor ailments represent an inefficient use of our scarce health resources, including the time of general practitioners whose skills are needed to care for more complex problems.

A study published in the British Journal of General Practice investigated people’s attitude towards management of minor illnesses. That study found that in most cases self-care is likely to be the course of action recommended by healthcare professionals. The findings of this study suggest ‘that when people opt for professional health advice, they prefer to seek community pharmacy advice for the symptom scenario presented. Results indicated that people prefer to wait less time and pay less money to manage symptoms, both of which are addressed by the ‘minor ailment service’.⁷

The Guild believes that the accessibility, skills and infrastructure within Australian community pharmacies make them an ideal place for a national minor ailments scheme to be implemented. All conditions that would qualify for a minor ailments scheme are within the current competency of a pharmacist. It is important to remember that pharmacists are highly trained and understand when it is necessary to refer a patient to a GP or other health professional.

Medication Continuance

Consistent with the rest of the developed world, Australia has seen a shift in disease burden over recent decades from acute and infectious disease to chronic disease requiring long term management. Prescription medicines are commonly used to treat chronic conditions such as cardiovascular disease, asthma, osteoarthritis and diabetes and need to be taken on an ongoing basis.

Community pharmacies in Australia regularly receive requests to supply ongoing medication to customers who, for one reason or another, are not able to present a valid prescription at the time. There are a range of reasons why consumers present with these requests such as the regular GP not being available. Pharmacies in tourist areas often receive such requests from interstate travellers who have left their medication at home or whose stay has been unexpectedly extended. Consumers on multiple medications also discover that they have run out of specific repeats which they should have requested at a recent doctor visit.

The situation becomes significantly more difficult over weekends and public holidays and, when possible, the consumer sees a doctor who has no knowledge of them or their medical history. In these cases the appointment becomes one purely to meet the requirement to obtain an authorised prescription. In some urgent cases the patient may even present at a hospital emergency department.

⁷ Porteous T, Ryan M, Bond C, and Hannaford P. Preferences for self-care or professional advice for minor illness: a discrete choice experiment. The British Journal of General Practice Dec. 2006

The Guild proposes that pharmacists have the authority to dispense a full supply of chronic medication to a patient who has run out, misplaced or lost their medicine, and for some reason or another, cannot provide a current prescription. This is not regarded as prescribing, but rather as a form of dispensing a Repeat, because supply under Medication Continuance would require the pharmacist to have previously dispensed the item requested. Detailed checks and balances have been developed to ensure patient safety and that the prescriber is informed following supply.

Acceptance by the medical profession of the valuable additional role pharmacists can play through Medication Continuance would mean that more of their time could be spent on tasks requiring their specialised skills and knowledge. The proposal would lead to an improved professional understanding and relationship between the pharmacist and the prescriber, which can only be of benefit to the patient.

The proposal would also significantly decrease the problem faced by prescribers in having to provide 'owing prescriptions' to their patients. This means one less administrative burden for the prescriber who can be confident their patient would return, in any case for a clinical review at the appropriate time, and when an appointment is available.

Pharmacists would be empowered through the proposal as they would be in a better position to meet the needs of their regular customers who at times find themselves without their long-term medicines. The proposal would provide pharmacists with a legitimate process, avoiding the cumbersome administrative processes provided through the current legislation, whilst at the same time utilising their training and experience as specialists in medication management.

Support for this proposal has also been received in writing from a number of key national organisations representing people with chronic illnesses, including Diabetes Australia, the National Asthma Council, Epilepsy Australia, Carers Australia, the Chronic Illness Alliance and Health Consumers of Rural and Remote Australia.

Nurse Practitioner Clinics

It is noted that both the Commonwealth and ACT Governments have brought forward initiatives involving nurses and nurse practitioners as a means of ameliorating the impacts of GP shortages and the consequent pressures placed on hospital emergency departments, particularly in respect of minor ailments.

While the Guild acknowledges the important role undertaken by nurses and nurse practitioners, the 'super clinics' being established by the Commonwealth Government in a limited number of locations across Australia are likely to only have limited impact on addressing the problems associated with GP shortages. Further, the Government's recent agreement to allow nurse practitioners to access MBS fees will only increase health costs and place an unnecessary drain on scarce health resources. It is pointed out that the conditions to be treated are the same as those faced by pharmacists every day.

While the ACT Government's proposal to establish the UK-based 'Walk-in Clinics' in the Territory are significantly more modest than the Commonwealth's initiative, it is suggested that they will only duplicate the health services already provided by community pharmacy, which are currently made available 'free of charge', and those clinics will only operate at limited times during the week/weekend, unlike community pharmacy that is generally accessible 7-days a week.

CONCLUSION

Community pharmacy plays a vital role in the provision of primary health care services in the ACT. With a network of some 61 pharmacies across the Territory, community pharmacy is one of the most accessible health services and is staffed by highly trained and trusted pharmacists and pharmacy assistants.

In recent years, pharmacists have demonstrated their ability and willingness to expand their role to include illness prevention and primary health care functions. They are keen to work in partnership with other health care providers in order to deliver accessible, integrated, safe and effective care to the community.

Community pharmacy is poised to assume an enhanced role in primary health care. With increased recognition that a primary health care system should be centred on the patient, the accessibility of community pharmacy builds strength in its case. Community pharmacists are the most accessible of all health professionals via this network.

The Guild therefore believes that a key solution to relieving the pressure on doctor availability is to make better use of our existing resources, particularly community pharmacies.

We see significant savings to be gained by fully utilising the existing pharmacy infrastructure and harnessing the under-utilised capacity of the pharmacy workforce to support the provision of effective and efficient health services.

The ACT Branch of the Pharmacy Guild and community pharmacy in the ACT is committed to continue to work collaboratively with the ACT Government, GPs and other health care providers in improving the health of the broader ACT community.