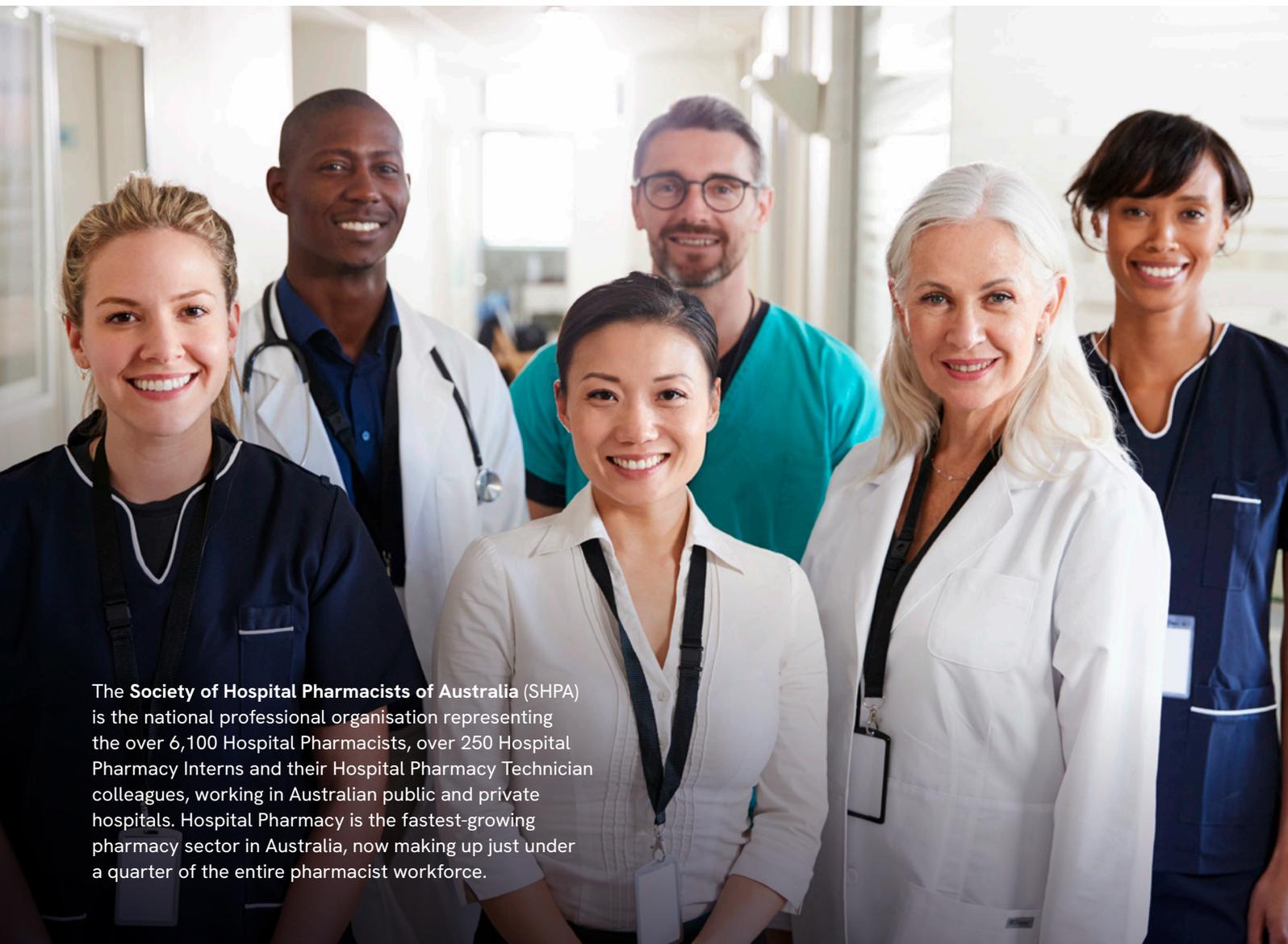


# 2022 FEDERAL ELECTION PRIORITIES STATEMENT



The **Society of Hospital Pharmacists of Australia (SHPA)** is the national professional organisation representing the over 6,100 Hospital Pharmacists, over 250 Hospital Pharmacy Interns and their Hospital Pharmacy Technician colleagues, working in Australian public and private hospitals. Hospital Pharmacy is the fastest-growing pharmacy sector in Australia, now making up just under a quarter of the entire pharmacist workforce.

## Hospital Pharmacy's contribution to the Australian healthcare system

Hospital Pharmacists are responsible for the supply of 24% of all Pharmaceutical Benefits Scheme expenditure annually – over \$3 billion – delivering PBS medicines to hospital patients as they are discharged from hospital, receive treatment at day treatment facilities, cancer clinics and outpatient clinics.

Hospital Pharmacists supply the majority of PBS-subsidised and non-PBS cancer medicines to Australian cancer patients, as well as the majority of PBS Highly Specialised Drugs. The majority of new PBS medicines listed in the past decade are initiated and/or supplied in hospital settings.

Hospital Pharmacists are integral to achieving the aims of Australia's National Medicines Policy, and addressing Medicines Safety and Quality Use of Medicines, Australia's Tenth National Health Priority Area, declared during this term of Parliament. Medication management services such as medicines reviews are proven to reduce hospital readmission rates and medication-related hospital admissions, of which there are 250,000 annually costing the Australian healthcare system \$1.4 billion each year.

# Hospital Pharmacy Sector Priorities for the 2022 Federal Election

To achieve the strategic medicines policy objectives set by the Australian government and to support the timely, quality, equitable and safe access to PBS medicines and medication management services to Australia, SHPA has identified three key priorities for the 2022 Federal Election that must be addressed in the next term of Parliament.



Priority 1: Continue and enhance support for **timely, quality, equitable and safe patient access to PBS medicines** in hospital settings through improved Pharmaceutical Reform Agreements

This can be enabled by:

- Retention of current Pharmaceutical Reform Agreements to enable continuous supply of PBS medicines in hospitals with no further reductions to remuneration
- Reduce longstanding PBS medicines access inequity for NSW and ACT hospital patients who are supplied as little as three days' worth of discharge medicines, by establishing Pharmaceutical Reform Agreements with respective jurisdictional governments to enable 30 days' discharge medicines supply
- Commit to five-year Pharmaceutical Reform Agreements for the public Hospital Pharmacy sector with the Commonwealth, jurisdictional governments and SHPA as signatories and aligned to the next iteration National Health Reform Agreement for Public Hospitals due to commence 1 July 2025. This would be similar to existing five-year Agreements between the Commonwealth and other pharmacy and pharmaceutical industry stakeholders.



Priority 2: Reduce longstanding inequity in **medicines access for Aboriginal and Torres Strait Islander patients** receiving PBS medicines from hospitals

Public Hospital Pharmacies must be enabled by the Commonwealth to supply medicines under the Closing The Gap PBS Co-Payment Measure in the next term of Parliament. The scope of the Closing The Gap PBS Co-Payment Measure should also extend to cancer medicines and highly specialised drugs on the PBS, which are currently excluded.

Unlike community pharmacies, public Hospital Pharmacists are currently unable to supply PBS medicines to Aboriginal and Torres Strait Islander patients under the Closing The Gap PBS Co-Payment Measure, which hamper Australia's efforts to close the gap in healthcare outcomes for Aboriginal and Torres Strait Islander peoples.

This results in inequitable, higher out-of-pocket costs and co-payments for Aboriginal and Torres Strait Islander patients, or missing out on medicines altogether and increasing their risk of readmission to hospital.



Priority 3: Commission a **ten-year National Pharmacy Workforce Plan** to support pharmacy workforce sustainability

The pharmacy workforce has evolved over the last decade tremendously with expansion in scope of practice in both community and hospital settings, and beyond into health system governance, aged care, digital health and general practice.

Pharmacy workforce shortages exist in all settings and have been exacerbated by the COVID 19 pandemic, and particularly in Hospital Pharmacy where specialised skillsets are required to deliver complex and acute patient care for critically unwell Australians. Hospital Pharmacy workforce shortages are felt the most in rural and regional Australia

To meet the immediate and future healthcare needs of the Australian community, leadership and strategic planning is required from governments to ensure Australia has a sustainable pharmacy workforce to achieve the aims of the National Medicines Policy and support the safe and timely supply of PBS medicines.