

POSITION STATEMENT

Pharmacists have established roles in interdisciplinary teams

Every Australian should receive effective medicines in the safest manner to optimise outcomes and reduce the risks from medicines. People with multiple chronic health conditions require complex care and require many medicines for many years.

The safe and effective use of medicines is underpinned by a patient-centred, collaborative and interdisciplinary team approach where the right service is delivered at the right time, in the right location, by the right practitioner, to the right patient.

SHPA believes that pharmacists should be part of such teams in all care settings across the health system to optimise outcomes from medicines for patients.

Team-based pharmacists may provide a range of services, for example:

- identify and address medication-related problems
- conduct medication reconciliation
- conduct medication management reviews
- develop and document medication management plans
- provide education to individual patients and patient groups as well as to other members of the healthcare team.

These services should be provided and prioritised on the basis of clinical need. Pharmacists may provide services themselves, liaise with other health settings (including hospital and community) and be part of the referral team for medication management reviews (e.g. home medicines reviews).

SHPA believes that innovative funding models are required to enable equitable access to pharmacist services across the continuum of care, based on clinical need.

Background

Pharmacists work alongside medical practitioners, nurses and allied health professionals in a range of settings to optimise health care. Pharmacists in Australian hospitals have worked successfully in patient-centred, team-based, collaborative care models for decades. This practice model is appropriate for all care settings.

Medication management review services in primary care and residential care, which are modelled on the team-based approach used in hospitals, were introduced nearly 20 years ago. These services are becoming more common in general practices. They improve medication use and reduce admission to hospital. SHPA believes that these services should be available for, and targeted to, patients at the highest risk of medication-related problems irrespective of the care setting.

A range of funding mechanisms are needed to enable patients to access to these services across the continuum of care, specifically:

- contracted / employed pharmacists in general practice, residential care and Aboriginal Health Services
- pharmacists in hospital and community pharmacy settings
- community pharmacies and pharmacists funded via the Community Pharmacy Agreement or, preferably, the Medicare Benefits Scheme.

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