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## **King Review: Hospital pharmacy an underutilised conduit to improve community care**

The interim report of the Review of Pharmacy Remuneration and Regulation (King Review) fails to acknowledge or leverage the pivotal role of hospital pharmacists in ensuring Australians have appropriate and convenient access to medicines, the Society of Hospital Pharmacists of Australia (SHPA) said today.

In its formal response to the interim report, SHPA reaffirmed the crucial value of including SHPA in Community Pharmacy Agreement (CPA) negotiations and decisions, while highlighted managing transitions of care between hospitals and the community and prioritising the development of Home Medicine Reviews (HMRs) as key aspects of the King Review.

SHPA Chief Executive Kristin Michaels says SHPA's response to the King Review was driven by the unique position of hospital pharmacists as progressive advocates for clinical excellence and committed to evidence-based practice.

'As a vital stakeholder group, managing significant Pharmaceutical Benefits Scheme (PBS) resources and trained to most appropriately initiate and manage the transition of care to the community setting, it is crucial the role of hospital pharmacists in ensuring Quality Use of Medicines is recognised through the involvement of SHPA in CPA negotiations.'

Ms Michaels says hospital pharmacists are equipped to influence a reduction in the 230,000 medicine-related hospital admissions per year in Australia, which cost the health budget \$1.2bn annually.

'Hospital pharmacists are an untapped resource in efforts to deliver truly patient-centred care, a goal which recognises people need considered guidance and support upon hospital discharge to ensure they can access and use the medicines they need.'

'SHPA represents a workforce that is armed with the expertise and operating within the infrastructure needed to immediately tackle this critical problem, in close partnership with community pharmacy, if liberated to do so through policy change.'

Ms Michaels says SHPA will continue to welcome support of hospital-initiated HMR referral pathways, as expressed by the King Review panel.

'It is important the proven value of medication review is fully realised by increasing access for high-risk patients through funding hospital initiated HMRs.'

'This is SHPA's long-held position and, in numerous international examples, has led to improved transitional care, demonstrating the importance of addressing this complex area with hospital and community pharmacy workforces.'

To ensure important pharmacy policy improvement opportunities are not lost, SHPA proposes 12 key changes should be made to significantly improve consumer access and patient care:

- Conduct greater consultation with SHPA regarding the CPA and examination of potential implications which affect the 17 per cent of PBS expenditure, as required in Federal Government principles regarding stakeholder negotiation.
- Clarify the management of funding outside the CPA; future pharmacy innovation should be encouraged in all pharmacy settings through a process independent of signatories of the CPA.
- Build PBS reform – including reforms of the PBS medicines in hospitals program - on the Key Performance Indicators listed in the Australian Pharmacy Advisory Council's Guiding Principles for Achieving Continuity in Medication Management as mandated in the Pharmaceutical Reforms Agreement.
- Align funding for community pharmacy services with the delivery of other allied health services and focus on patient outcomes.
- Ensure policy and remuneration planning for community pharmacies supports greater liaison with hospital pharmacies for the benefit of patients, rather than being limited to non-collaborative dispensing or patient counselling.
- Prioritising the development of hospital initiated referral pathways for Home Medicine Reviews to enable independent accredited pharmacists to support patients who have recently attended the acute care setting.
- Support the development of electronic prescribing and electronic prescription records, interoperable with hospital-wide electronic medical records, in a hospital setting to ensure current and accurate records can be provided to and accessed in primary care settings and community pharmacies.
- Build on the quality of care mandated in the Public Hospital Pharmaceutical Reform Agreements and the Australian Pharmacy Advisory Council's Guiding Principles for Achieving Continuity in Medication Management to support care for patients transitioning from hospital into community.
- Introduce an MBS item number for clinical review and advanced pharmacist consultation to support greater utilisation of clinical pharmacy skills.
- Remove the cap for high-risk patients to avoid inequitable access to Home Medicine Reviews.
- Enable hospital pharmacies to supply Dose Administration Aids with the same funding conditions as community pharmacies to prevent high-risk patients having delayed or disrupted access to medicines when discharged from hospital.
- Provide support for consumer access to pharmacy services that recognises, in some circumstances, access to a hospital pharmacy, rather than a community pharmacy, is preferable.

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## **About SHPA**

The Society of Hospital Pharmacists of Australia (SHPA) is the national professional organisation for more than 4,500 pharmacists, pharmacists in training, pharmacy technicians and associates working across Australia's health system. SHPA is the only professional pharmacy organisation with a core base of members practising in public and private hospitals and other health service facilities.

SHPA is committed to facilitating the safe and effective use of medicines, which is the core responsibility of pharmacists, especially in hospitals. SHPA supports pharmacists to meet medication and related service needs, so that both optimal health outcomes and economic objectives are achieved for Australians, as individuals, for the community as a whole and for healthcare facilities within our systems of healthcare.