

**Senate Community Affairs Committee**

**ANSWERS TO ESTIMATES QUESTIONS ON NOTICE**

**HEALTH AND AGEING PORTFOLIO**

**Additional Estimates 13 & 15 February 2013**

**Question:** E13-206

**OUTCOME 2:** Access to Pharmaceutical Services

**Topic:** Home Medicines Review

**Type of Question:** Written Question on Notice

**Senator:** Senator Di Natale

**Question:**

How has the department addressed the discrepancy between the claims of underfunding of the Home Medicines Review program by the Pharmacy Guild of Australia with the findings of the recent evaluation of the Home Medicines Review program conducted by Campbell Research and Consulting, which found that a substantial majority of community pharmacists are not initiating Home Medicines Review?

**Answer:**

A number of key recommendations resulting from the Campbell Research and Consulting report (Campbell Report) in 2008 were implemented under the Fifth Agreement.

This included the introduction of a direct referral pathway, which occurred in 2011. This change, directly following from the Campbell Report, improved access to the timely provision of a Home Medicines Review (HMR) service. In addition, direct referral has empowered the patient to choose whether their usual community pharmacy or accredited pharmacist conducts the service.

In addition, the Department of Health and Ageing and the Pharmacy Guild of Australia (the Guild) continue to work on the implementation of a hospital referral pathway to a HMR in the immediate post-discharge period. This work, which also directly follows a recommendation from the Campbell Report, will increase access and timely provision of HMRs to patients who are at high risk of medication misadventure, and will be implemented in 2013.

Referrals for HMR services can only be made by a General Practitioner (GP) based on clinical judgement and assessment of patient's need. Pharmacists, consumers and/or their carers as well as other health care professionals involved in the health care of the patient can recommend to the GP that a HMR may be suitable, but ultimately the decision to refer is made by the GP.

The Guild claim of underfunding is in reference to recent increased growth in the number of HMR services being delivered. The Campbell Report does not contain a finding regarding funding of the HMR Program, it only discusses stakeholder's opinions towards remuneration of GPs and pharmacists.

Significant growth in the HMR service indicates there is still significant unmet demand for this service among consumers.