

ANSWERS TO ESTIMATES QUESTIONS ON NOTICE

HEALTH AND AGEING PORTFOLIO

Supplementary Budget Estimates 2011-2012, 19 October 2011

Question: E11-357

OUTCOME 2: Access to Pharmaceutical Services

Topic: PHARMACY LOCATION RULES

Written Question on Notice

Senator Fierravanti-Wells asked:

- a) The fifth community pharmacy agreement provided "\$227 million for additional programs to support and deliver patient services"? What has been achieved for each of these additional programs in terms of the number of pharmacies participating, the number of services provided or other deliverables? How much of the funding has been spent or allocated?
- b) The fifth community pharmacy agreement also stated that "current compliance arrangements will be improved to ensure ongoing accountability and the quality of services". How have compliance arrangements been improved? What have been the outcomes of compliance programs?

Answer:

- a) The Fifth Community Pharmacy Agreement (Fifth Agreement) operates from 1 July 2010 until 30 June 2015, and includes up to \$277 million in allocated funding for additional programs to support and deliver patient services as follows:
 - Clinical Interventions, which encourage pharmacies to identify, manage and document drug-related issues associated with a patient's medication (\$97 million);
 - Dose Administration Aids, which seek to assist patients to better adhere with their medication regimen and reduce the risk of medication misadventure (\$132 million);
 - Staged Supply Support Allowance, which provides support to pharmacies to provide dispensed Pharmaceutical Benefits Scheme (PBS) medicines in instalments when requested by the prescriber (\$35 million);
 - Supply and PBS Claiming from a Medication Chart in Residential Aged Care Facilities, which seeks to reduce duplication of effort for prescribers and pharmacies and will improve patient safety (\$3 million); and
 - Electronic recording of controlled drugs, to address problems of forgery, abuse and doctor-shopping of controlled drugs (\$5 million).

In addition, a one-off allocation of \$5 million was made available in 2010-11 to support the accreditation system and roll-out of additional programs to support Patient Services.

The Clinical Interventions, Dose Administration Aids and Staged Supply Support Allowance components of this allocation are a key part of the Pharmacy Practice Incentives (PPI) Program. The Program commenced on 17 March 2011, and as of 28 September 2011:

- 4,546 pharmacies have registered for the Clinical Interventions component, and received a start-up payment of \$4,550;
- 4,626 pharmacies have registered for the Dose Administration Aids component, and received a start-up payment of \$1,800; and
- 4,458 pharmacies have registered for the Staged Supply Support Allowance component, and received a start-up payment of \$1,720.

The Supply and PBS Claiming from a Medication Chart in Residential Aged Care Facilities initiative is expected to commence from 1 July 2012 subject to passage of the bill through Parliament. This initiative will enable pharmacists to supply eligible PBS medicines from a medication chart in Residential Aged Care Facilities, instead of requiring an additional prescription.

The Electronic Recording of Controlled Drugs (ERRCD) initiative will be implemented from 1 July 2012. The Department has recently completed a Request for Expressions of Interest process for the development of a system to support the ERRCD initiative. An announcement will be made in the near future.

- b) The key mechanism to ensure improved quality, accountability, and compliance has been included in core eligibility requirements for the PPI Program. In order to participate in the PPI Program each pharmacy must meet the following eligibility requirements.
- A participating pharmacy must be currently accredited under a nationally-recognised accreditation program. Currently the Quality Care Pharmacy Program is the only nationally-recognised program, and has been assessed and approved by the Joint Accreditation System of Australia and New Zealand, which is a recognised conformity assessment body.
 - Participating pharmacies must display and comply with a Community Pharmacy Service Charter, which is based on the Australian Charter of Healthcare Rights, and seeks to inform patients and consumers of their rights, as well as the quality of health services they can expect to receive from their community pharmacy.

In order to assess that a pharmacy is compliant with quality requirements under the PPI Program, each participating pharmacy must demonstrate compliance with the relevant standards by providing examples of documentation of quality services being delivered to meet those standards.

Pharmacies will be assessed through the Quality Care Pharmacy Program by external pharmacy audit every two years and self assessed internal audit in intervening years.

In addition, the Department of Human Services through Medicare Australia will undertake retrospective compliance activities consistent with those that apply under other Government programs including the Pharmaceutical Benefits Scheme, Medicare Benefits Scheme, and the Practice Incentives Program.