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#### 2nd phase audit

THE Pharmacy Board of Australia has announced that the second phase of its audit pilot of pharmacists will kick-off in October.

As part of the process pharmacists will be randomly selected when they apply to renew their registration for 2012-13.

Pharmacists who are selected will be audited for compliance against the Pharmacy Board's registration standards, including: criminal history check, professional indemnity insurance, recency of practice and continuing professional development.

#### **Be MedicineWise**

NPS has moved to calm consumer concerns over media reportage of a number of medicines which will increase in price this week, saying that while the cost of a medicine may differ from brand to brand, if the active ingredient and size of the dose are the same then the medicine will work the same in their body.

"You will only be offered a choice of brands if the medicines are bioequivalent," said NPS CE Dr Lynn Weekes.

"This means each brand has the same active ingredient, the same dose and has been proven to work the same in your body as the other brands available," she added.

To further allay fears, NPS is encouraging Aussie consumers to visit its online Medicine Name Finder which is designed to help people discover the different PBS-listed brands which may be available for their medicine, see - nps.org.au/ bemedicinewise/brand choices.

## National heart attack register

**AUSTRALIA** needs a national heart attack register to continuously track and monitor cardiac services, according to an article published this week in the Medical Journal of Australia.

Authored by Heart Foundation cardiologist Professor Derek Chew, the article argues that having a national register will tell medical practitioners whether people are getting the right tests and the right procedures at the right time.

Professor Chew also said that a national register would aid in identifying high risk patients who are falling through the cracks of the current system and would help to track people in the event of a device failure or recall.

"An Australian has a heart attack every ten minutes and yet we know

#### Lifestyle conference

THE 4th annual Lifestyle Medicine Conference will be held between 2-4 November this year at Freshwater in Sydney.

The conference will cover Lifestyle and longevity; Muscle, fat, sarcopenia and weight loss; Plantbased nutrition and chronic disease; Endocrine Disrupting Chemicals and what to do about them; Pregnancy and menopause; Lifestyle, obesity and the gut microbiome; Low intensity lifestyle interventions in clinical practice; and Evidence-based complementary medicines: their place in Lifestyle Medicine.

For more details see www.lifestylemedicine.com.au. very little about the quality of treatment they receive once they're in hospital - it's like driving a car without a speedometer," Professor Chew said.

Professor Chew continued to argue his point saying that in the wake of a heart attack cardiologists can restore blood flow by inserting a balloon into the artery, but survival rates are highest when this happens within 90 minutes of the patient having arrived at hospital.

"We believe that this critical 'door-to-balloon' time of less than 90 minutes is only achieved in around 40 per cent of heart attack cases," he said.

"A comprehensive national register would give us greater insight as to what causes these potentially life-threatening delays and whether certain groups or locations are more affected.

"Without this ongoing monitoring or feedback, we cannot possibly know whether we're delivering a good service for heart attack patients," he added.

#### Indigenous research

**THE** Government has funded three new Centres of Research Excellence to focus on Aboriginal and Torres Strait Islander health issues.

The first centre will be run by Professor Anne Chang from the Menzies School of Health Research and will focus on lung health of Aboriginal and Torres Strait Islander children, whilst the second will be led by Associate Professor Gail Garvey, also at the Menzies School of Health Research, and will focus on improving Aboriginal and Torres Strait Islander cancer outcomes.

The third centre will be headed up by Professor Simon Stewart, from the Baker IDI Heart and Diabetes Institute in Melbourne, and will aim to reduce inequality in heart disease.

"These three centres have the potential to make a real difference to the health of our Aboriginal and Torres Strait Islander population," said Minister for Indigenous Health, Warren Snowdon.

#### Osteoporosis webinar

**ARTHRITIS** NSW is hosting two web-based seminars for the general community in September.

The first webinar, 'Osteoporosis and Exercise: Strong, Straight and Stable', will take place on 05 Sep from 11.30am-12.30pm, and will be presented by Sally Castell, a physiotherapist who specialises in exercise for older adults, who will address the important role of exercise in maintaining healthy bones and in preventing and managing osteoporosis.

The second webinar 'Shoulder Pain and Arthritis', presented by Judy Chen, physiotherapist specialising in shoulders, will take place on 20 Sep between 2-3pm, and will cover how arthritis affects the shoulder joint, how to manage shoulder pain and exercises for the shoulder joint.

The cost of both of these webinars is \$15 for Arthritis NSW members and \$20 for nonmembers, whilst premium members of Arthritis NSW can register for the webinar for free. Computer requirements for the webinars are internet connection, sound capabilities and the latest version of Adobe Flashplayer.

To register call Arthritis NSW on 1800 011 041

#### Being a Drug Peddler

TIM Hewitt of Albion Park Pharmacy is encouraging pharmacists, pharmacy staff and other industry members to join his Drug Peddlers team in the annual Sydney to Wollongong bike ride to raise money for MS Australia.

"If you think you would enjoy a nice bike ride down the coast to the beautiful Illawarra, you are encouraged to slip into the lycra and join friends and colleagues for a jolly nice day out!," he said.

"If you don't want to ride (pikers!), then log on, donate and support a colleague," he added.

To join the team, simply register to ride at www.gongride.org.au then join the Drug Peddlers team.

Participants will be able to download posters, receipt books and much more to make it easy for sponsors and customers to donate.









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#### Weekly Comment

Welcome to *PD's* weekly comment feature. This week's contributor is *Roma Cecere*, GM for Patient



Care division of GuildLink.

#### The success of Professional Services in Australian Pharmacies

We do this all the time' is the phrase we often hear when discussing the types of professional services being delivered in Australian pharmacies.

Monitoring of Blood Pressure or providing services like DAA has been the mainstay of Australian pharmacy for many years, but it has been a difficult task trying to estimate the number of these services being delivered across the country.

With the assistance of the GuildCare software pharmacies can not only measure the number of the services they deliver but also gauge their effectiveness on patient outcomes and impact on the business.

Since the launch of GuildCare Programs pharmacists across the country have delivered over 1.5 million interactions with the patient across 3,000 pharmacies, with the best performing pharmacies delivering over 6,000 cases and average pharmacies over 400 cases per year.

The GuildCare platform facilitates engagement in various types of programs:

- 5CPA Pharmacy Practice Incentives (PPI) e.g. Clinical Interventions
- 5CPA Medication Management
- e.g. recently launched MedsCheck
- Private Services e.g. Blood Pressure monitoring
- Private Programs e.g. Compliance

GuildCare Programs were launched as part of the PGA's initiative to have a national systemised platform for delivering professional health services, for more info visit guildcare.com.au or phone 1300 647 492.

### Need for stronger penalites?

**THE** Australian Competition & Consumer Commission (ACCC) should explore the scope for 'meaningful penalties' which could be included in the Medicines Australia Code of Conduct, 17th edition.

The comments come as part of a submission to the ACCC regarding the updated Code from Bruce Arnold, Lecturer at the University of Canberra's School of Law.

"It is clear that leading corporations that are expected to participate in the Code have engaged in egregious bad practice (signalled for example by the recent multi-billion dollar settlement in the US

involving GlaxoSmithKline)," he said, adding that a token financial penalty is not a meaningful deterrent.

"Some entities are clearly unfussed by notions of corporate reputational damage, particularly when small-scale financial penalties signal to the mass media that the offence was insignificant," he said.

"A US\$3 billion settlement grabs attention and shapes behaviour.

"Token penalties under the current regime do not," he added.

Arnold goes further to say that the Code does not provide a "substantive and adequate response to what are fundamental issues involving a range of actors in the health sector".

"If industry and individuals are to enjoy self-regulation that regulation must be meaningful, with effective enforcement of a *Code* that represents best practice rather than embodying a Potemkin Village approach to industry responsibility," he said.

"The history of health sector regulation in Australia and overseas demonstrates that we cannot expect meaningful change – in essence an abandonment of what I recently described as pharmaceutical payola – unless the Code reflects the commercial imperatives of service delivery in Australia and the weakness of professional ethics regimes, evident through the willingness of practitioners to accept benefits that have a tangible financial value and raise legitimate concerns about

probity frameworks," he added.

MEANWHILE Arnold also used his submission to press for full disclosure of payments to individual practitioners and health service groups, saying that there is no compelling reason for Medicines Australia not to establish "a more granular disclosure".

Arnold also argued that value of the Code is eroded by the Medicines Australia's membership structure, "which does not encompass all major actors in the sector", saying that it would be desirable to include substantial entities such as Ranbaxy Australia that offer substantial inducements but fall outside the Medicines Australia and GMiA codes.

Arnold also pushed for a greater degree of engagement by industry with other stakeholders – in particular consumer associations and other civil society bodies, saying this would enhance the legitimacy of the Code development process and enable industry to better address potential misconceptions.



#### DISPENSARY CORNER

A DOCUMENTARY film maker and shark expert, Jim Abernethy, has found out the hard way that nature does not respect personal property no matter what its price tag is, after a shark made off with his \$15,000 camera.

Abernethy was in the midst of making a doco on marine life in the tropical waters of the Bahamas and had placed a series of video cameras on the ocean floor to capture the action, when the theft occurred.

Footage of the theft was captured by one of the doco's camera operators, who was swimming around getting footage and happened to spot a tiger shark, nicknamed Emma (pictured below), dislodging the \$15,000 camera and take off with it.



#### WIN A EUKY BEAR PACK

Every day this week, **Pharmacy Daily** is giving one lucky reader the chance to win a Euky Bear Pack, valued at \$50, courtesy of **FGB Natural Products**.



Each pack contains a Euky Bearub, Euky Bear Thermometer, Koala Soft Toy and Information Guide.

Euky Bear to the rescue! Little noses blocked? Luckily there is a natural way to provide some

relief to your sniffling tot, with Euky Bearub! This fast acting, gentle and naturally soothing Australian Eucalyptus chest rub helps to relieve a sore throat, clear a stuffy nose and soothe irritating chesty coughs.

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