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Today's issue of PD

Pharmacy Daily today has two pages of news plus a full page from Pharmacy Connect.

HCH program

THE Community Pharmacy in Health Care Homes Trial Program has been extended by 18 months.

The program funded under the Sixth Community Pharmacy Agreement enables eligible pharmacies to work in conjunction with the Health Care Home team delivering patient-centred medication management services.

Originally scheduled to conclude on 30 Nov, the trial has been extended until 30 Jun 2021, with pharmacies in, or close to the boundaries of the 26 Australian Primary Health Networks originally included, likely to receive patient invitations.

AMA seeks role in 7CPA talks

MOVES to expand the scope of pharmacists risks fragmenting the primary care system and have the potential to damage doctor/patient relationships, Australian Medical Association (AMA) West Australia President, Dr Andrew Miller (pictured) warns.

Responding to Thu's (PD 02 Aug) announcement that pharmacists have been approved to provide MMR, dTp and meningococcal vaccines to patients aged 16 and older, Miller told **Pharmacy Daily**, the medical profession appreciates the work pharmacists do in cooperation with GPs at the coalface, but expressed concerns that cross-over in the roles performed by the two professions could lead to worse outcomes.

"GPs realise they do not see the scope for pharmacy," he said.

"They do however provide the diagnostic capability and work closely and are affected by what pharmacists do, particularly where that replicates work commonly

done by GPs at the moment.

"If a lot of vaccination is done in pharmacy it does eventually chip away at intervention opportunities that GPs need.

"Talk of triage, diagnostics, investigation and more in pharmacy means GPs are also thinking of how their practice might change, so they can avoid fragmentation of care and worse outcomes."

Miller said more inter-professional dialogue was needed to support the development of the general practice and pharmacy models.

"It we are to offer patients choice of primary health care givers, some doing similar things, then GPs will be wanting to work with pharmacists in different ways in future," he said.

"[Having a] close relationship with a community pharmacy, employment of embedded pharmacists and dispensing of a range of Pharmaceutical Benefits Scheme items and more from



within a general practice are all options we will explore.

"Having a role in the Seventh Community Pharmacy Agreement will be important for the medical profession given the more integrated nature of some of these proposals, and that is what we will be asking for, as well as the flexibility in those arrangements.

"This will allow new modes of pharmaceutical and care delivery to the community, for the improve convenience and safety of patients."

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References:

¹ Glasier, A. F. et al. Ulipristal acetate versus levonorgestrel for emergency contraception: a randomized non-inferiority trial and meta-analysis. *Lancet*. 2010 Feb 13;375(9714):555-562. Erratum in: *Lancet*. 2014;384(9953):1504.

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Dispensary Corner

WORKING in a pharmacy is a traditional way of getting some practical experience while studying for a lot of aspiring pharmacists.

One US student, with a passion for “participating in Revolutionary War living history events”, took the “traditional” approach to the extreme, spending her “advanced pharmacy practice elective” working in an 18th century-themed pharmacy in Colonial Williamsburg.

Throughout the rotation, fourth year pharmacy student, Chenoa Shelton, ditched the white smock modern pharmacists wear, for a bonnet, a demure blue dress and an apron, to fully embrace the history of pharmacy.

During the elective Shelton was able to study 1700s compounding practices, letters from pharmacists to their suppliers and local newspaper ads from the time.

While pharmacists’ scope of practice has evolved over the years, Shelton noted “pharmacists in the 18th century were referred to as doctors and could see patients and prescribe medications just like physicians”.



Chemist Warehouse all smiles

CHEMIST Warehouse (CWH) has announced a new partnership with SmileDirectClub, the US-based teledentistry pioneer, to expand access to affordable and convenient orthodontic “clear aligner” therapy.

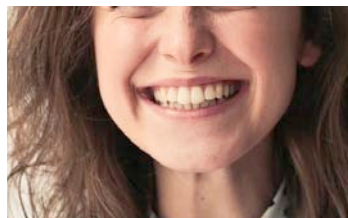
Beginning in Aug, SmileDirectClub will open SmileShops in selected CWH locations in Victoria.

The SmilesShops will feature onsite SmileGuides to assist customers in their smile journey, which includes a free 3D photograph of their teeth and information on the convenience and affordability of clear aligner therapy.

A member of SmileDirectClub’s affiliated Australia-based network of registered dentists and orthodontists will prescribe and manage each custom clear aligner treatment plan from start to finish.

Compared to traditional orthodontic braces which can set consumers back between \$5,000 to \$9,000, usually less than half of which can be recouped through private health insurance.

SmileDirectClub’s clear aligner



therapy can be purchased for a one-time cost of \$2499, or a \$399 deposit and \$99 per month for 24 months, the company said.

Average treatment length is said to be around six months.

CWH Director, Mario Tascone, said, “At Chemist Warehouse, we pride ourselves on enhancing the customer experience with innovation, quality, and affordable services for our customers’ health, wellness, and beauty needs”.

“In collaboration with SmileDirectClub, we’re helping our customers get one step closer to a straighter smile that they love – and that they can afford.”

The first three CWH pharmacies involved are Epping Homemaker Centre, VIC, Box Hill Whitehorse Road, VIC and Karingal, VIC.

The eyes have it

GUILD Learning and Development has partnered with Alcon to update the course titled *Pharmacy Health Solutions: Eye care*.

The accredited course covers contact lens care - [CLICK HERE](#).



Weekly Comment

Welcome to Pharmacy Daily’s weekly comment feature. This week’s contributor is **Simon Furletti**, Student Experiential Placements (StEPs) Manager, Monash University.



Early, Enhanced and Often: Why Monash is changing its approach to placements

WHEN we were designing our new pharmacy course, we consulted a range of practitioners to determine what qualities they valued in graduates. The profession was unanimous: they wanted graduates who could demonstrate their skills from day one.

So we overhauled our approach to placements.

Our Student Experiential Placements (StEPs) program is distinguished by three things: placements begin earlier; they’re enhanced to be more useful to both the student and the preceptor; and they happen more often.

Where historically students have started placements in the third year of their degree, Monash students now take their first StEPs in the first year of the degree. Right from the beginning of the degree, they think of themselves as pharmacists in training.

“Enhanced” is all about providing transparency and a deeper student experience. StEPs are built upon a list of “entrustable professional activities”, or “EPAs”. EPAs designate the set of tasks students can complete, as well as the level of supervision they require from preceptors for each activity.

The final differentiator is “Often”. With 90-100 days of placement running across the degree, the StEPs program ensures students graduate with career ready skills.

Win with ULTRASENSITIVE

This week Pharmacy Daily and ecostore are giving readers the chance to win a prize pack of products from ecostore’s ULTRASENSITIVE home and body range, valued at over \$90.

Be in to win a shelf-ready pack of ecostore’s key ULTRASENSITIVE products and supporting collateral, to offer your customers an asthma and allergy-aware solution for home and body care. Approved by Sensitive Choice for Australians with sensitivities. [CLICK HERE](#) for more.

To win, be the first from NSW or ACT to send the correct answer to the question to comp@pharmacydaily.com.au

What does the Sensitive Choice “blue butterfly” logo help customers identify?

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