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## Time to remove barriers to full scope

**AUSTRALIA** needs its health professionals working to the full extent of their scope of practice to deliver the best outcomes for patients, Federal Shadow Assistant Minister for Mental Health, Emma McBride, believes.

Speaking on a webinar hosted by Blooms The Chemist last night, the pharmacist-turned-politician, said existing remuneration systems had "limited" the profession's ability to deliver for individuals and society more broadly.

"We have a cohort of highly trained expert health practitioners," she said.

"And I think that in the past they've been limited because of the way that pharmacy has been set up, remunerated or the systems they've been working in have put a ceiling on what they can contribute.

"Pharmacists are experts, they're trained, they're experienced, they're capable and they have so much to contribute, and

the benefits to individuals and communities, but also our economy are significant.

"It's more about the system recognising and remunerating them for that, that will really see the transformation that we need.

"If we are to genuinely see a transformation in health outcomes in Australia then we need to see every person working within health working to the top of their scope, so we can see a real lift and improvement in health outcomes across Australia."

McBride also noted the increasing role pharmacists are playing in the area of mental health.

"We're in the middle of a global pandemic and so many people's livelihoods are being impacted as many people have found themselves out of work who've never been out of work before, and we sadly know the link between financial distress and mental health," she said.



"Pharmacists are there on the frontline, often as accidental counsellors, and it's really welcome to see so many pharmacists now doing mental health first aid and other mental health training.

"Pharmacists are really there on the frontline, someone can walk into the pharmacy, doesn't need to make an appointment and you're there supporting them."

### Today's issue of *PD*

*Pharmacy Daily* today features three pages of news plus a full page from **Total Beauty Network**.

### TBN Xmas range

**TOTAL** Beauty Network is today showcasing its extensive Christmas range for 2021.

More than 65 products are on offer under the Designer Brands, Colour by TBN and Raww brands - see **page four**.

### Iron warnings

**THE** Therapeutic Goods Administration has advised of revisions to the Product Information for parenteral iron products such as Ferinject, Ferrosig, Monofer and Venofer.

The class-wide labelling update includes warnings about fetal bradycardia and Kounis syndrome.

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## Assessment tool trial for interns

THE Australian Pharmacy Council has announced its new tools for intern pharmacist assessment and feedback will be piloted in hospital and community pharmacies over the next three months.

Pharmacies in the ACT, Vic and South Australia will take part in the trials, which follow a consultation period on the changes to the Intern Year Assessment Blueprint (PD 25 May) which aim to improve preceptor and intern experiences.

A total of six tools (and three-letter acronyms) have been developed as part of the program, covering in-training assessment (ITA), case-based discussion (CbD) and Entrustable Professional Activities (EPAs), with the Council saying it had received "great feedback" so far.

## Twomey takes aim at PHNs over PPE

CEOs of primary health networks (PHNs) in Sydney are being urged to "get off the couch" and start getting taxpayer-funded personal protective equipment (PPE) to pharmacies.

With community pharmacies across NSW being given the green-light to administer the AstraZeneca COVID-19 vaccine to all adults over the age of 18 years, Pharmacy Guild of Australia National President, Trent Twomey, voiced his frustration at the lack of support pharmacies in hotspot areas have received from their local PHNs.

Speaking on ABC Radio's *The World Today*, Twomey noted that pharmacy owners were putting their hands in their pockets to source PPE to protect staff and patients - a point previously highlighted by Guild NSW Branch President, David Heffernan (PD 27 Jul).

"The taxpayers [have] paid for a whole heap of PPE for essential workers in exactly this situation, yet it isn't being made available,"

Twomey said.

"And unfortunately we've had some pharmacists who've had to take themselves offline for 48 hours while they wait on [COVID test] results.

"I'm frustrated that my members are put at risk, and my members' patients are put at risk.

"So what I'd ask is that those PHNs do exactly what their name suggests and they get off the couch, they get out of their houses and their office building and they go out and build relationships with local community pharmacists.

"How are we supposed to do our job and stay open and protect our patients... if they're not doing the job that they're paid to do?"

Twomey said pharmacy owners were angry that they were being taken away from frontline duties and forced to "chase their tails and use creative ways to get hold of this essential stuff".

He added that the funds being spent by pharmacies on PPE was



"money that could ordinarily be spent on more wages or more staff".

**MEANWHILE**, Heffernan described the NSW State Government's move to lower the age for patients to receive the COVID vaccine in pharmacies from 40 to 18 years and older as a positive step.

"The NSW Government has arrived at the right decision in regards to making the vaccine more widely available, and it is a significant milestone in encouraging more people to be vaccinated," he said.

## Set Up for Success: COVAX in Community Pharmacy

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- Pharmaceutical Defence Limited's take on AstraZeneca guidance to vaccinating patients under 60 years old
- Live Q&A session with industry experts



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## Dispensary Corner

**CONCERNS** are being raised over an Irish GP's fitness to mingle in public following a social media post questioning the requirements for patrons at bars and restaurants to be vaccinated against COVID-19.

In a tweet that has illicited scorn and support in worrying measures, Dr Marcus De Brun said, "so let me get this straight in my head, I can have AIDS, chlamydia, gonorrhoea, Ebola, hepatitis, meningitis and conjunctivitis, and I can eat in a restaurant and go to the pub, but if I haven't had a vaccine for COVID-19 (aka nasty cold virus) I'm barred".

The comment has led some to question De Brun's credentials, prompting one Canadian GP to ask "are you planning to eat with your genitals?"

While another asked De Brun "what do you do in your restaurants and pubs that you could inadvertently spread gonorrhoea, chlamydia, hepatitis and HIV to a large number of people?"

Responding to criticism of his post, De Brun said "the tweet informs that one can have all manners of communicable disease and freely enter a bar or restaurant".

"The tweet does not state that STIs etc... are 'airborne' or transmissible in bars," he said.

"It would seem that belief in the COVID narrative can sometimes cause wilful ignorance."

De Brun closed his practice last year following criticism of his stance on COVID-19.

## Give rural pharmacy a chance: Dariz

**DISILLUSIONED** pharmacists who are planning on leaving the profession should consider spending a couple of years in a rural area before quitting.

Raven's Recruitment General Manager Australia and New Zealand, Heidi Dariz, told *Pharmacy Daily* that the profession is experiencing a significant brain drain, with many pharmacists abandoning the profession worn out by their experiences in urban and suburban stores.

"There are career opportunities," she said.

"It can be great, but I just don't think they're seeing that - especially in the universities.

"We go around and we talk to the students and even now the third and fourth year students are getting jaded, they're saying 'there's no jobs, there's no career path, and then I'm going to have to work all these awful hours and have these stresses'.



"They're coming out of Sydney and Melbourne and they're working in discounters or something and they're not happy, and they're feeling 'I'm not getting paid enough, I'll just leave the industry altogether'.

"We try to convince them to just do two years rural practice.

"You've done this whole degree, do two years rural, then if you don't like it leave the industry, just give it a chance, because it could be so much different to what you're experiencing now.

"But a lot just aren't willing to do it."

### Body cameras issued to UK pharmacists

**A DISTURBING** rise in incidents of abuse against British pharmacy staff has seen the Boots chain issue body cameras at over 60 branches across the country, according to a report in British trade paper *Chemist+Druggist*.

The company has confirmed it started trialling the cameras at the beginning of the year, initially in Birmingham but now also in Sheffield and Rotherham.

A rollout to other locations is under way, with a Boots spokesperson quoted as saying "like other retailers, we are concerned about the increasing problem of violence and abuse experienced by hundreds of thousands of retail workers, which has been exacerbated by the COVID-19 pandemic".

Staff at the branches have the option of wearing the cameras, and turn them on if they experience a "difficult interaction with a member of the public, who they inform of the body cam's recording".

Boots said the initiative had been "hugely successful in de-escalating issues as they arise," with team members saying they feel safer and more confident when wearing them.

Boots also monitors CCTV from its branches at a new HQ facility staffed by 20 security officers.

Dariz voiced support for calls for pharmacy courses to include mandatory rural placements, to encourage city-based students to consider working outside of the major metropolitan areas.

"When the students do that rural placement, and when they come back they're like 'my eyes were opened', and so many more of them are willing to consider the option, at least for 12 months or two years."



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