

Time to fix rural pharmacy funding

RURAL pharmacists are calling on the profession's leaders to include better financial supports and measures to boost the workforce at the top of their Federal election wishlists.

In a statement released by the Rural Pharmacy Network of Australia (RPNA) this morning, the group urged the Pharmacy Guild of Australia and the Pharmaceutical Society of Australia to push for reform of the rural classification system, used to determine the support rural and remote pharmacies receive through the Rural Pharmacy Maintenance Allowance.

The group noted that the shift from the PhARIA to the Modified Monash Model for rural classification had stripped funding away from hundreds of stores in rural areas, threatening the viability of the community pharmacy network in remote and isolated parts of the country.

"The upcoming election brings an opportunity to rectify this issue and to better ensure the funding distribution genuinely reflects the purpose of the program to support patient access to Pharmaceutical Benefits Scheme medicines

and pharmacy services," the spokesperson said.

"RPNA has modelled various alternative scenarios that would see funding better targeted to the most vulnerable and isolated communities.

"We have modelled two scenarios that work within the existing funding envelope and shift funding away from larger and more accessible pharmacies into the lower volume and more remote pharmacies.

"A third scenario shows what is possible using the existing method of calculation but with a funding injection of approximately \$3.5 million."

The RPNA added that ideas such as HECS debt relief - recently floated by the Society of Hospital Pharmacists of Australia in its pre-Budget submission (PD 01 Feb) - and bonded loans, to entice pharmacists to rural areas have been "thrown around for decades", without any action to address the workforce shortages being faced by those in rural pharmacy.

"If we are really serious about addressing the pharmacy workforce deficit in rural areas, we need as a priority, a system of government-funded salary incentives such as



those enjoyed by the medical and allied health workforces (but not pharmacy) tiered according to rurality and number of years in rural practice," the RPNA spokesperson said.

"This should be a top election priority for any organisation representing rural pharmacies or pharmacists."

The RPNA has previously called for the introduction of a workforce incentive program to help rural pharmacists to attract workers (PD 19 Jan 2021).

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Corum focused on market share

PHARMACY software provider, Corum Group's efforts to regain market share have been hampered by the pressure COVID-19 is putting on individual stores, the company reported to investors this morning.

Outlining its performance in the first half of the 2022 financial year in a statement to the Australian Securities Exchange this morning the company reported a 4% bump in revenue - falling short of its target of 15%.

However, the company said its strategy to regain market share remained unchanged.

With 90% of pharmacies not affiliated with the group or banner, Corum plans to target brands through its relationships and head office product, while building on its PharmX platform.

Remuneration not covering costs

PHARMACY owners in NSW are thinking twice about their participation in two COVID-19 programs as costs outweigh the remuneration being offered by the Federal Government.

Data from the Pharmacy Guild of Australia revealed that close to 50% of pharmacies across the State have decided against providing paediatric COVID-19 vaccinations with the Federal Government fixing fees at \$16 for the initial shot - \$10 less than for administering booster doses - while rebates for rapid antigen tests (RATs) provided free of charge to concession cardholders are falling short of wholesale prices, *ABC News* reports.

Guild NSW Branch Vice President, Judy Plunkett, said the current funding meant it was "completely unviable" to participate in the paediatric vaccination program.

"People are really desperate to get their kids vaccinated but many pharmacies are not engaging in

the rollout, because of the level of remuneration," she said.

"Children require that little bit of extra care and attention and often the parents are also anxious... yet we are paid \$10 less per vaccination."

Pharmaceutical Society of Australia (PSA) NSW Branch President, Chelsea Felkai, said the remuneration model "just doesn't make sense", adding the discrepancy in funding for pharmacist administered vaccinations compared with GPs "shows there's no understanding of what we do within community pharmacy and how much we provide to the community for the government to think we can provide these services at such a low rate and so much less than GPs". Felkai added that "lots of

pharmacies are deciding not to" join the concessional RAT program because the remuneration was insufficient to cover the costs of the tests.

"If the only stock we can get is \$12 per RAT and it's a five pack, we're \$10 under when we give it out as a concession package," she said.

Guild NSW Branch President, David Heffernan, told the broadcaster that pharmacists were "overwhelmed" and "taken for granted".

"We have been there with a mop and bucket trying to clean up 'policy by press release' announcements, whether that's supply chain issues, RATs or the vaccine," he said.

"We don't really have a properly instituted health roundtable to nut out some of those problems."

Government urged to invest in self-care

THE Federal Government is being urged to "capitalise on Australians' capacity to take greater responsibility for their health outcomes", by establishing a dedicated Self-Care for Health Development Fund.

The Australian Self-Care Alliance (ASCA) said investment in empowering patients to play a more proactive role in their healthcare would ensure the sustainability of essential frontline health services.

ASCA Chair, John Bell, said "the need for an informed and engaged consumer for effective prevention and health

management is pressing and indisputable".

"A long-term fund dedicated to self-care innovation and development should be established with a mandate to facilitate and expand self-care engagement," he said.

"Dedicated investment from the Federal Government, along with a systematic approach to build self-care capability and enhance self-care activity in all aspects of health and healthcare, is required if Australia is to capitalise on the health, economic and productivity benefits available through greater self-care."

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Dispensary Corner

WHILE pharmacists around the globe have been encouraged to exercise their rights not to dispense ivermectin and hydroxychloroquine, legislators in Kansas, US, are pushing a Bill that would compel them to supply the medications.

The legislation proposed by Republican State Senator, Mark Steffens, would require pharmacists to dispense prescriptions for both drugs to treat COVID-19, despite experts saying they did not work.

"I do think we made it perfectly clear that they can't refuse to fill an appropriate prescription based on a known or unknown or soon-to-be diagnosis," Steffens said.

While Steffens and his Republican colleagues have backed measures to force pharmacists to supply the medications, Democrat rival, Cindy Holscher, has warned that passing the legislation would drive health professionals out of the State.

"With this type of Bill, you're putting a sign out saying 'we don't want healthcare professionals in Kansas,'" Holscher said.

"This is the type of thing that scares away healthcare professionals from operating in Kansas... it mandates the pharmacist to fill the prescription, even if it's incorrect.

"The role of the pharmacist is to keep people safe... the science is very clear, those drugs are not effective and they carry significant side-effects and risks."

Govt plots pharmacy approval reform

LEGISLATIVE amendments relating to the Health Minister's discretionary powers to grant Pharmaceutical Benefits Scheme (PBS) approval for new pharmacies is included in the *Regulator Performance Omnibus Bill 2022*, which is currently before the Federal Parliament.

The amendments, which impact the *National Health Act 1953*, aim to streamline the request process by which the Minister can exercise discretion to approve a premise by combining the current two-stage process into a single stage, which would cut the timeframe for approvals from six to four months.

The reforms will also prevent a second request for the exercise of the Minister's discretion from being made within 12 months of a decision in relation to a previous request by the same applicant for the same premises.

"These amendments will provide more timely access to



pharmaceutical benefits where the Minister exercises discretion to approve a pharmacist, and allow for more efficient operational arrangements to support effective administration of the PBS," the Bill states.

Introducing the Bill to the House of Representatives, Assistant Minister for Youth and Employment Services, Luke Howarth, said the current process of seeking Ministerial approval was "frustrating and time-consuming for the applicant".

"It also delays the community's

access to pharmaceutical benefits in circumstances where the Minister decides to exercise their discretion, and imposes an administrative burden on government resources," he said.

"The *Regulator Performance Omnibus Bill* is an important piece of the architecture that supports our regulatory stewardship approach.

"If passed, it will be a key moment in the story of the Australian Government's deregulation agenda."



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AZ gets TGA COVAX booster approval

PROVISIONAL approval has been granted for AstraZeneca's Vaxzevria COVID-19 vaccine to be administered as a booster shot to people aged 18 years and older, by the Therapeutic Goods Administration (TGA).

Under the approval, an AZ booster can be given if clinically indicated with reference to the official guidance regarding the use of a heterologous third dose of an mRNA vaccine.

"This means that the decision to receive Vaxzevria as a booster must be made in consultation with a medical professional. The mRNA COVID-19 vaccines (Comirnaty or Spikevax) are

preferred as the booster dose in Australia, irrespective of the primary COVID-19 vaccine used," the TGA said.

"This includes for people who received the AstraZeneca COVID-19 vaccine for their primary course.

"The Australian Government continues to encourage individuals to have a booster (third dose) following their initial two vaccination doses to enable strong protection against severe illness and hospitalisation, particularly from the Omicron variant."

Further information is set to be published in the coming days.