



Today's issue of PD

Pharmacy Daily today features three pages of news, plus a full page from **Pharmacium** and a fact sheet from **GS1**.

Designs that suit

PHARMACIUM designs spaces that dovetail into the way you work.

It has hundreds of pharmacy-design projects to help you decide what suits you best and improves efficiency.

See more on **page four**.

Scan vital data

GS1 recommends looking at your pharmacy's scanning equipment and technology as 2D barcodes on products are growing in healthcare.

GS1 has a fact sheet on its camera scanning technology.

Find out more on **page five**.

Voting opens for leaders

VOTING is now open for the Pharmaceutical Society of Australia (PSA) branch committee elections.

The high number of nominations said to have been received from PSA members means that all branch committees will go to election with all eligible voters receiving voting instructions today.

Outgoing PSA CEO Mark Kinsela (*PD* 19 Dec 2022) (**pictured**) encouraged all PSA members to vote for the future leadership of the PSA.

"Branch committees serve an important purpose for the PSA, from appointing the PSA Board, providing input and advice on local policy issues affecting pharmacists, and fighting for every pharmacist across your state or territory," Kinsela said.

"Electing members to serve on branch committees gives members the opportunity to have their voices heard, and to affect the future of the entire profession.

"I encourage all PSA members



to engage with the election process - reach out to your branch committee candidates and make sure your vote counts."

Voting and election provider CorpVote has been appointed to manage the election process.

Voting is open from midday today and will close at 11.59pm AEST on Mon 01 May.

Successfully elected branch committee members will be announced on Wed 03 May, and will serve a three-year term from 01 Jul 2023 to 30 Jun 2026.

New petition

A **NATIONAL** voice for GPs has put out a petition to "illustrate the collective alarm in the medical profession" about the pharmacist-prescribing trial in North Queensland.

The *Australian Doctor* has a petition, which will be presented to all states and territories as well as the Federal Government, includes wording that "pharmacists with virtually no training in the complexities of differential diagnosis are being expected to diagnose, manage, prescribe and dispense drugs for conditions ranging from skin problems and acute nausea to asthma and COPD as well as heart disease risk factors.

"Allowing hundreds of health practitioners to prescribe and dispense S4 medications and antibiotics also dismantles the prescriber-dispenser divide," the publication said.

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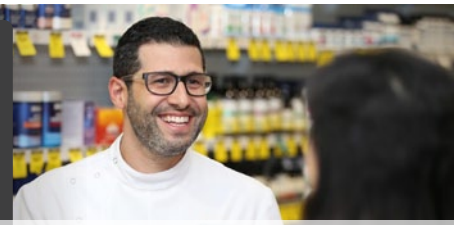
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Kids maltreated

AN AUSTRALIAN-first study published in *The Medical Journal of Australia* yesterday has found the abuse of children is widespread across the country.

The *Australian Child Maltreatment Study* surveyed 8,500 randomly selected Australians aged 16-65 years and over, finding high prevalence of childhood maltreatment experienced by people of every age group.

It found that, in childhood aged up to 18, one-third had experienced physical abuse, sexual abuse, or emotional abuse; nearly one in 10 had experienced neglect; and just under one in two of respondents had been exposed to domestic violence.

"It is sobering to learn these results," said lead investigator Prof Ben Mathews, Principal Research Fellow at the School of Law at Queensland University of Technology.

"Some maltreatment types, especially sexual abuse and emotional abuse, have been found to be strongly associated with mental disorders and health risk behaviours (including cannabis dependence, self-harm, and suicide attempt).

"In addition, many children experienced more than one type of maltreatment with girls more likely to experience multi-type maltreatment than boys, with gender diverse even more so," said Mathews.

Guild workforce survey

THE Pharmacy Guild acknowledges the workforce issues faced by the profession, and to better predict and influence the workforce dynamics, the Guild is undertaking a Workforce Capability Project 2023.

At APP, the Pharmacy Guild's National President Trent Twomey spoke on how "this project is compiling a comprehensive outline on the workforce's capability, capacity and employability needs within and for community pharmacy, from both an owners perspective and pharmacist point of view.

"What we see this doing is helping to assist in effective advocacy and strategic decisions.

"It includes supply and demand modelling, remuneration, career pathways, qualifications, training needs, employment classifications and scope of practice."

To aid this project all pharmacists are encouraged to anonymously have their say in the Guild's 2023 Workforce Survey, [HERE](#).



\$3b lost: review

TODAY, the Federal Govt released the findings of the *Independent Review into Medicare Compliance and Integrity* that didn't find fraud did find that the likely cost to taxpayers is \$1.5 to \$3b a year, with a significant part stemming from non-compliance errors rather than premeditated fraud.

PBS price changes for flutiform meds

THE price of flutiform 50/5 (fluticasone propionate + formoterol (eformoterol)) as listed under item code 2827T on the PBS was incorrectly reduced.

The price for 2827T that appears in the 01 Apr 2023 PBS Schedule is therefore incorrect.

Further, pharmacists are asked to see the following erratum which has been published to correct the pricing of this brand

in the PBS Schedule dated 01 Apr. In addition, the ex-manufacturer prices spreadsheet for 01 Apr also reflects the correct prices for flutiform 50/5.

Pricing information for flutiform 50/5 as linked above supersedes any previous pricing information published on this website.

The correct pricing will appear in the PBS Schedule for 01 May 2023.

Early intervention

NEW research in the *JAMA Network Open* evaluated the potential cost savings of a therapy for babies displaying early autism signs, and has predicted a \$3 return to NDIS for every dollar invested in therapy.



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*Peter Alexander offer ends Friday 14th April 2023.

Dispensary Corner

STRESSED plants emit sounds. And what does a stressed plant sound like? A bit like bubble wrap being popped, according to new findings.

Researchers in Israel reported in the *Cell* on 30 Mar that when tomato and tobacco plants are stressed - from dehydration or having their stems severed - they emit sounds that are comparable in volume to normal human conversation.

The frequency of these noises are too high for human ears to detect, but they can probably be heard by insects, other mammals, and other plants.

“Even in a quiet field, there are sounds that we don’t hear, that carry information,” said senior author Lilach Hadany, evolutionary biologist, Tel Aviv University.

“There are animals that can hear these sounds, so there could be a lot of acoustic interaction occurring.”

Although ultrasonic vibrations have been recorded from plants before, this is the first evidence that they are airborne.

Microphones were used to record healthy and stressed tomato and tobacco plants, first in a soundproofed acoustic chamber and then in a noisier greenhouse environment.

The plant sounds resemble pops or clicks, and a single stressed plant emits around 30-50 clicks per hour at seemingly random intervals, but unstressed plants emit far fewer sounds.

“When tomatoes are not stressed at all, they are very quiet,” says Hadany.

\$1.5m for one-stop shop

A **MACQUARIE** University team has been awarded \$1.5m in new funding to create a digital one-stop platform for faster and easier medication reviews by pharmacists that could improve the safe use of medicines in residential aged care.

Dr Karla Seaman and Dr Magda Raban at the Australian Institute of Health Innovation at the University were awarded the new funding in the latest round of Medical Research Future Fund grants for the platform that will allow all stakeholders, including pharmacists, GPs, residents and their carers, and aged care staff, to monitor the medication review process.

This research is in response to reports during the Royal Commission into Aged Care Quality and Safety, which found that aged care residents are at increased risk of harm from medication errors, with each resident experiencing on average three to four medication-related problems.

“Involving all stakeholders more routinely in the review of medication, and having the review recommendations followed, is a very effective way of improving care for residents,” said Dr Seaman, who is the lead investigator.

The project, led by Macquarie University and involving Edith Cowan University, will design, deliver, and evaluate an innovative electronic medication management review (eMMR)-portal which will:

- identify residents at increased risk of poor outcomes due to medication-related problems; and
- deliver a transparent communication process by which medication review requests, recommendations, actions, and outcomes can be



monitored by pharmacists, GPs, residents and carers, and residential aged care staff.

“This integrated approach will make optimal use of medication reviews for the safer use of medicines in residential aged care,” said Raban.

“It will also reduce the burden on residential aged care staff by enabling real-time communication between them and the pharmacist, GP, resident and their carers,” said Seaman.

Led by Macquarie University, the multidisciplinary team will include pharmacists, researchers, nurses and general practitioners.

Project partners include the Pharmaceutical Society of Australia, Best Health Solutions, Heritage Care, Aged Care Industry IT Council, Aged Care Quality and Safety Commission, and Consumers Health Forum.

The grant is from the Medical Research Future Fund - Preventive and Public Health Research Initiative - 2022 Quality, Safety and Effectiveness of Medicine Use and Medicine Intervention by Pharmacists Grant.

Guild Update

Canberra meetings to secure CPA funding

GUILD National President, Professor Trent Twomey, has wrapped up a week in Canberra having back-to-back meetings with government officials after the Health Minister said he’s inherited a funding shortfall including for the seventh Community Pharmacy Agreement (7CPA).

In a video sent to members, Twomey said he was at Parliament House to negotiate funding outcomes for pharmacists.

“The biggest issue we’re here (in Canberra) to talk about is the one that was raised by the federal Minister of Health at last week’s Australian Pharmacy Professional Conference (APP) in front of 7,500 pharmacists and pharmacy assistants, that’s the shortfall in funding the current 7CPA,” he said in the video.

Twomey said that according to the Minister Mark Butler, the programs in the agreement are valued by Australians but the Government currently does not have enough funds for the full five years of that program.

“So, what we’re down here to do is to make sure that not only your dispensaries are viable, but those programs continue right up until the end of the five years of that program,” Twomey said in the video.

The details of the future funding arrangements for all health programs will be unveiled in the budget on May 9th.

To see the video, **CLICK HERE**.

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System recommendations for Australian Pharmacy Camera-based scanners and standards capability

The use of '2D' barcodes has been increasing organically within healthcare for many years, with a significant focus on traceability and batch management driving this change. With the introduction of new regulations by the Therapeutic Goods Administration (TGA), an increased focus on product authentication and the greater focus on inventory management and supply chain due to shortages increased 2D barcodes are appearing on prescription and OTC products. Being sure that all systems in pharmacies can handle these

barcodes is a must, this means there is a need to look at scanning equipment and systems to ensure that can manage the barcodes and the data they hold.

Choosing camera-based scanning technology and ensuring that solutions or applications can read data from the 2D barcodes and can parse the data string following global data standards should now be included in the digital strategies across healthcare.

What's in the barcode?



(01) 0 9312345 531370
(17) 201231
(10) ABCDEF123456
(21) 10022337269ABCDEF

(01)09312345531370

(01) The Global Trade Item Number (GTIN) formerly the EAN. A 14-digit system capability is a must to be able to process this correctly

(17)201231

(17) The Expiry Date in a 6 digit machine readable format of YYMMDD. It can be presented within a system or for staff in a more human friendly field

(10)ABCDEF123456

(10) The Batch/Lot Number of up to 20 Alpha Numeric characters

(21)10022337269ABCDEF

(21) The Serial Number of up to 20 Alpha Numeric characters

The barcode is a GS1 DataMatrix. Its format and the data within it are all based on standards used globally

What do your technology solutions need?

All Inventory, Dispensing and Point of Sale systems need to be able to interpret the data from these barcodes. You can check your systems, report issues and source advice by [visiting here](#)

Need Advice?

E healthcareteam@gs1au.org T 1300 227 263

Do you have camera-based scanners?

Whilst traditionally we have had linear barcodes being used and these only needed linear scanners, these new barcodes need camera-based, imaging scanners. Though a camera or Charged Coupled Device (CCD) based scanner can still read a linear code for traditional barcodes unfortunately the reverse is not true, therefore with any upgrades to scanners, a change to camera-based scanners is recommended.