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Today's issue of PD

Pharmacy Daily today has three pages of news, plus a full page from:

- Australian Garlic Oil

ACCC moves to support supply

THE Australian Competition and Consumer Commission has granted interim authorisation permitting Medicines Australia (MA) and the Generic and Biosimilar Medicines Association (GBMA) to discuss and implement strategies to support the continued supply of medicines, during the COVID-19 crisis.

MA CEO, Elizabeth de Somer, welcomed the announcement.

"[The] authorisation underscores the importance of an integrated supply chain for our medicines," she said.

"And I thank the GBMA for working alongside us in addressing the challenges we now face as a result of COVID-19."

The authorisation came into effect on Fri, and follows a similar move for wholesalers.

RACGP flu vax criticism out of tune

CLAIMS that allowing pharmacists in Victoria to provide National Immunisation Program (NIP) vaccination services in aged care facilities and workplaces, as of 01 Apr, is a "recipe for disaster" are being dismissed by the Pharmacy Guild of Australia.

In an article published on the Royal Australian College of General Practitioners' (RACGP) *newsGP* website, the College's President, Dr Harry Nespolon, raised safety concerns saying pharmacists "do not have the medical training required to safely deliver vaccinations and respond to associated risks, such as anaphylaxis, that can very occasionally occur".

Responding to Nespolon's comments, Guild Victorian Branch President, Anthony Tassone, said that with many GP clinics restricting face-to-face patient interactions as a result of the COVID-19 crisis, there was a need to make all immunisers available to administer the influenza vaccine this year.

"I'm not sure if Harry's fax is broken and he didn't receive the memo that there's a global COVID-19 pandemic," he said.

"Nespolon's repeated snipes at



our profession are hopelessly out of touch and unhelpful.

"It's very likely that demand for the flu vaccination will exceed supply [this year], and we must do whatever we can to appropriately and safely administer available stock to those patients that seek it.

"It would be a travesty if there was NIP stock sitting in a fridge of a medical centre somewhere that had closed due to practising telehealth, and had not been redistributed to another general practice or a pharmacy for utilisation."

Tassone told *Pharmacy Daily* that most GPs on the ground were appreciative and supportive of the efforts being made by community pharmacists across the country.

"It's about time the RACGP was

actually in tune with the grass roots and what is happening at the local level rather than chasing headlines," he said.

"We all just want to get on with it.

"It's like he [Nespolon] has an autosend on his email for the dial-a-quote have a crack at pharmacy, 'something about pharmacy, we're going to criticise it', having no regard for the context or the circumstances."

MEANWHILE, Tassone noted that Victoria was the second state to allow pharmacists to administer vaccines outside of the community pharmacy setting, following Tasmania, adding the ACT's legislation was "silent" on where pharmacist immunisers can vaccinate.



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Reference: 1. Resolve Plus Product Information. Date of Most Recent Amendment 26 October 2018.





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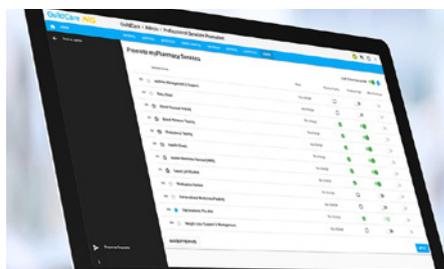


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Reference: 1. Data held on file at Ego Pharmaceuticals Pty Ltd.



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Concerns for one-pharmacy towns

RURAL pharmacists operating in single pharmacy towns are pleading with the Federal Government to introduce a funding package to enable them to keep their doors open should a staff member be forced into isolation as a result of COVID-19.

The Rural Pharmacy Network Australia (RPNA) warned patients living in rural and remote areas could see their access to essential medicines cut if any member of a store's staff is diagnosed with the virus, warning the cost of hiring locum pharmacists and pharmacy technicians and assistants would not be adequately covered by Emergency Locum Service funding.

In a statement issued this morning, RPNA co-founder, Fredrik Hellqvist, called for a government guarantee

of financial support to ensure continuity of medicines supply in single pharmacy towns.

"While GPs have been thrown a so-called '\$700 million lifeline' to deliver telehealth services during this crisis, none of the Federal Government measures announced so far provide any assurance for rural pharmacies to ensure service continuity if any team member in a one-pharmacy town is diagnosed as COVID-19 positive and has to self-isolate," he said.

"It is likely that under the Communicable Diseases Network Australia guidelines that all other pharmacy staff will be classified as 'close contacts' and will also have to self-isolate.

"Pharmacy owners will have a choice of closing down until sufficient staff can return to work, or finding the extra funds to cover the cost of a locum pharmacist plus critical support staff such as pharmacy technicians and assistants.



"The extra costs of keeping the doors open for two weeks in these circumstances could easily run to \$11,000, or even more.

"This is simply too great a cost for small pharmacies, which are already struggling against a remuneration system that treats them unfairly.

"They would be financially much better off to close, leaving their community with no pharmacy."

Hellqvist said a guarantee would provide assurances to vulnerable communities that they are adequately prepared to face the impacts of the pandemic.

Prioritise your mental health

PHARMACISTS are being urged to focus on their personal health and wellbeing, as the COVID-19 crisis places significant pressure on health professionals.

In an open letter to the profession, Blooms The Chemist, thanked pharmacists and other frontline staff for their "dedication, service and courage" in supporting their communities.

"It's been a tough month, and it's important to prioritise your health and wellbeing as much as possible," the pharmacy group said.

CLICK HERE to access support resources from the Pharmacists' Support Service.



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Sigma move to boost home delivery

PHARMACEUTICAL wholesaler, Sigma Healthcare, is partnering with logistics firm, Drive Yello, to support pharmacy home delivery services, during the COVID-19 pandemic.

The solution is being offered to Sigma's retail pharmacy network, allowing pharmacists to simplify, scale and support existing delivery services.

Users will receive an SMS

providing a link to live tracking of the delivery, via the Yello Platform, to ensure they will be home to receive their order and track delivery progress.

The home delivery service will in most instances be free of charge to vulnerable and at-risk patients due to the recent funding package offered by the Federal Government to support in home delivery.

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Which oceanview room has the most space?

Find out more in the Autumn edition of *Travel & Cruise Weekly*

Travel & Cruise Weekly

Dispensary Corner

LOTS of conditioner is probably now needed by contestants in the annual Takhini Hot Springs Hair Freezing Contest, with the winners announced last week.

The competition takes place at a remote, very cold place about 20 minutes north of Whitehorse in Canada's Yukon region.

The technique involves dipping your head under the warm water and then allow the cold air - best at below -20°C! - to "slowly freeze your hair".

More than 200 entries were received this year, with some of the winners pictured below:



Best female



Best male



People's Choice Award

The People's Choice winner (above) is appropriately sponsored by a Korean instant Noodle company called Nongshim - check it all out at hairfreezingcontest.com.

ACT acts on COVID crisis

PHARMACY'S peak bodies have backed the ACT Government's decision to implement emergency dispensing measures, allowing pharmacists to dispense maximum Pharmaceutical Benefits Scheme quantities to patients without a prescription (**PD** breaking news).

The move brings the territory into line with other states and the Northern Territory, in enabling pharmacists to dispense emergency supplies of prescription medicines where they are satisfied there is an immediate need, during the COVID-19 pandemic.

The authority will initially remain in place until 30 Jun, and mirrors a similar measure announced by the Territory Government during the bushfire crisis earlier this year, which expired on 31 Mar.

"This move by the ACT Government is welcome and sensible - aligning with most other jurisdictions that have taken this step to facilitate medicine continuity," a spokesperson for the Pharmacy Guild of Australia said.

Pharmaceutical Society of Australia



(PSA) ACT Branch President, Renae Beardmore, said the measure would consistency of medicines supply for patients during the pandemic.

"General Practitioners across the ACT are under extreme pressure and this measure provides certainty to patients who are unable to access their usual prescriber due to COVID-19," she said.

"PSA fully supports and thanks the ACT Government for this very sensible approach which will ensure patients in the ACT have continued access to essential medicines during the COVID-19 pandemic."

Tough times call for collaboration

RESTRICTIONS implemented in response to the COVID-19 pandemic are inspiring small business owners to innovate and collaborate.

One example of businesses working together has been identified at a TerryWhite Chemmart pharmacy in Hawthorn, Victoria, which has partnered with a local cafe, Blac, to allow patients pick up a takeaway coffee while waiting for their prescriptions.

LinkedIn user, Zoran Jovanovski,



the General Manager of Porta, a timber mouldings producer, praised the business owners for setting up the temporary in-pharmacy barista service, pictured above.

Weekly Comment

Welcome to Pharmacy Daily's weekly comment feature. This week's contributor is **Gerard Stevens, Managing Director, Webstercare.**



RACF best practice dividends

WHEN you're run off your feet you need every possible advantage. Right now that would describe all healthcare professionals, especially pharmacists and those who support residential aged care facilities (RACFs).

Most people outside the profession have no appreciation of both the illegality of dispensing medication without a prescription, and the negative impact on cash flow.

To address this the National Residential Medication Chart (NRMC) was enacted in 2014. This paved the way for NRMC-compliant, computer-generated medication charts to be a valid prescription, with the exception of S8 medications and some on Authority. It eliminates the illegal practice of owing prescriptions.

I take some pride in being the principal lobbyist for this innovation.

It means that an onerous task for pharmacists - preparing owing prescription lists and relying on doctors to write up multiple prescriptions - is eliminated.

The computer-generated NRMC delivers these benefits and more, reducing patient risk and eliminating the chance of mismatch between prescriptions and the medication chart.

Adopting this best practice improves your financial position, redeploys staff involved in repairing owing lists, eases doctors' workloads, and reduces patient risk.

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