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EDITOR'S LETTER





elcome to *Pharmacy Daily*'s 2024 edition of our Year in Review special report, where we reflect on the major industry news from the year gone by.

In this issue, a number of industry executives have shared their thoughts on the year, including PSA President Fei Sim; TerryWhite Chemmart Executive General Manager Nick Munroe; National Rural Health Alliance CEO Susi Tegan; and Jim Margaritis, Vice President of APAC at Teva.

As Fei Sim noted when we spoke to her for this report, 2024 really was "a landmark year" of growth and maturity for the profession.

We also have a mega month-bymonth feature looking at some of the biggest stories of the year, from the changing scope of practice across different states to new PBS listings, training opportunities and the momentous launch of the 'Doctor of Pharmacy' title.

The Eighth Community Pharmacy Agreement, which took effect on 1 July, was huge, of course, with its large funding boost set to benefit both pharmacists and patients.

Then there were the controversial changes to vape supply, with pharmacists now having a key role in their distribution in the community, and by extension potentially helping people to quit smoking.

While many have embraced the opportunity to support would-be quitters, it has come at the cost of increased workload.

It will be interesting to see how the story develops over the next year.

Having only recently joined *Pharmacy Daily* as the new editor, it is inspiring looking back through the year's highlights and seeing the developments in pharmacy.

With many years' experience in health and medical journalism, writing for doctors, allied health professionals and consumers, I am excited to now write from a pharmacy perspective.

We publish *Pharmacy Daily* for you, and we are always keen to get feedback and hear about the stories you want to see. Please feel free to reach out at karina.bray@pharmacydaily.com.au. ••

2024 REALLY WAS "A LANDMARK YEAR" OF GROWTH AND MATURITY FOR THE PROFESSION.

> **Karina Bray** Editor Pharmacy Daily

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What a cracke of a year

This year, I qualified as a pharmacist prescriber – a career milestone that has been incredibly rewarding. The journey has had its challenges, but the support from TerryWhite Chemmart has truly been second to none.

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Therese Lambert, Pharmacy Owner and Network Partner TerryWhite Chemmart Sarina, QLD



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ccording to Fei Sim, National President of the Pharmaceutical Society of Australia (PSA), 2024 brought monumental change to the industry and pushed the profession forward.

"This really has been a landmark year. It was a year of change, but also a year of growth and maturity for our profession," she says.

Here, she shares with *Pharmacy Daily* some of the major highlights of the year and discusses their true significance to the industry.

The impact of the 8CPA

"This is actually the first year ever in history that the PSA has entered into a strategic agreement with the federal government.

People know about the Eighth Community Pharmacy Agreement (8CPA), but they probably don't fully know the impact and importance of the strategic agreement. It's essentially an agreement that our profession has with the federal government, recognising our shared vision for the profession in terms of our role in primary care. It outlines the shared vision of how we're going to enable pharmacists to play an even greater role in primary care.

At the same time, the document outlines how all of this will be done in a professional manner, and recognises pharmacists as healthcare professionals. If you look at the history of pharmacy practice, we've come a very long way from having a retail image in terms of being transactional, selling and supplying medicines to now recognising that even dispensing in itself is a clinical activity, and that pharmacists can continue to provide clinical services for patients.

Regardless of areas of practice, all of this needs to be underpinned by standards and guidelines and how we can actually uphold and maintain them. That's why this strategic agreement actually went hand in hand with the CPA.

The strategic agreement sets out a whole program of work, including updates and the establishment of new standards and guidelines. Those things are actually fundamental to any decisionmaking around the direction of a profession, and that includes funding and how it guides what legislation should happen and so on.

It was absolutely monumental. It applies to community pharmacy practice, but also all areas of practice, including hospitals, aged care, GP practices, and all other emerging areas of practice. It's a very positive thing, not just in terms of others' perception [of pharmacy], but it also puts us on a different platform now as a profession.

And of course there was the signing of the 8CPA between the Pharmacy Guild of Australia and the federal government. Again, that was monumental because it gave the profession and the community pharmacy sector the certainty and stability that it needed that was otherwise challenged by the introduction of the 60-day dispensing policy.

Sometimes I think the profession needs to appreciate the significance of it. It really cements the important role that pharmacists play in terms of dispensing PBS medicines to ensure Australians have equitable access to medicines that are affordable and in a timely manner. »

This 8CPA has allowed the funding to concentrate on those elements which are the fundamental blocks of our profession. If you look back at the first CPA and the second CPA, and why we even have a CPA in the first place, it was around this.

But over time, because we have been expected to lift our weight in primary care and do more in primary care, a lot of the funding, the remuneration of pharmacists and the expectation that we will continue to service the community, were all lumped into the same bucket.

That actually dilutes our core role as pharmacists, which is to ensure safe and effective optimisation and use of PBS medicines, but we're expected to do more and more primary care services.

So the construct of the agreements from this year is significant, because we've now got a strategic agreement for professional pharmacist practice with a very specific purpose.

We have the 8CPA now focusing on the core role of what the CPA was meant to deliver, and gives certainty and stability to the community pharmacy sector.

But at the same time, the work is not done, because we're still in the process

of negotiations with the government around the other programs that either will no longer be governed within the 8CPA after the first 12 months, or programs that were new and emerging and never under any agreement.

As we continue to see pharmacists' role continue to evolve and expand to meet the needs of people on the ground, this is a continuous journey.

But we do now have a construct to allow these things to occur."

Scope of practice

"The scope of practice review report that was released in November really highlights and makes recommendations for major reforms to our health system. And it's not just relevant to pharmacy, but it essentially recognises a number of things.

It's saying that our current health system is inefficient. That is key, because it recognises that the current way we are doing things - going back to a GP for referrals each time, putting regulatory red tape around scope and not allowing all professions to practice through our full scope - is inefficient, and they're not serving the needs of Australians. »



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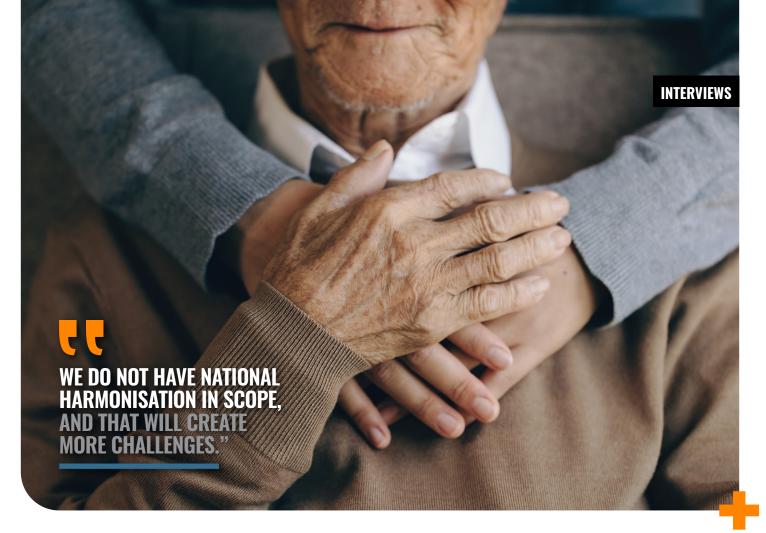
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And the second big thing is it really has very explicitly said that primary care refers to health care that is outside of a tertiary environment where a patient wants to seek care - and that doesn't only include general practice.

We have high respect for general practitioners, of course, but primary care is broader than just GPs. It's GPs and nurses, pharmacists and other allied health professionals. There is a huge section [in the report] around the role of pharmacies and pharmacists in primary care. We're not talking about just in-community pharmacy, but also in residential aged care homes in general practice, Aboriginal mental health services and so on. Basically in all primary care settings where medicines are used, pharmacists should have a role to play.

The scope of practice review recommendations really resonated with a lot of what we put forward in terms of the vision for the profession and how we can better serve the profession.

Of course, now the challenge is that they are recommendations. The government needs to now do something about it. We have called on the government to act on it and move on to implementation, and accept all of those 18 recommendations as soon as they can. That really is going to best serve the contemporary needs of patients."

Expansion of scope

"We are continually seeing an expansion of scope, including prescribing and the management of common ailments and chronic conditions across jurisdictions in Australia.

We had the Queensland prescribing pilots and this year, the government announced the expansion and committed to how it will be rolled out to help improve patient access to care by allowing pharmacists to manage all of those 23 conditions.

That's a really good example of showing how we can really fully utilise the skillsets of pharmacists to benefit patients and improve access to care. We're seeing other states and territories adopting this [same approach]. For example, UTIs, pharmacists' resupply of oral contraception, management of skin conditions, and various other pilots are popping up as well.

Of course, we're still on a journey. The big thing in 2024 is we're seeing significant momentum in scope expansion. But the more expansion we're seeing, the more disparity we're seeing across the different states and territories, because we do not have national harmonisation in scope, and that will create more challenges for pharmacists moving forward."

Aged-care on-site pharmacists

"We've been talking about aged care on-site pharmacists for a long time. You may recall the first commitment was made back in 2022. Finally, on 1 July this year, there was the implementation of the ACOP Measure (which allows eligible community pharmacies to access funding to employ on-site pharmacists to work in eligible residential aged care homes in a clinical role).

But again, it's not a perfect system. We're trying to advocate for improvements, because we are seeing some issues, but it's at least moving in the right direction."

HMRs and RMMRs

It's not often spoken about, but there's a lot of hard work happening behind the scenes in the commitment to ongoing funding for HMRs and RMMRs.

There's obviously a lot of room for improvement and there are a lot of things that our credentialed pharmacists who perform HMRs and RMRS would like. There are so many things that should happen in relation to indexation and caps.

At one point in time, those programs had no security, but this year, when we solidified the 8CPA and the strategic agreement, we managed to get confirmation that there is ongoing funding built into the budget." »







2025 and beyond

"Even though it's a new calendar year, that momentum of evolution will continue into 2025. We will see an even more rapid upscale of scope expansion, which will then lead to navigating the lack of national harmonisation.

If I take a step back to look at the wider landscape, there is a lot of policy work happening at a government level that will affect pharmacies.

We do have the federal election coming up in March next year. It is really important from our perspective to make sure that our profession continues to have bilateral support for the work that we do. Regardless of which party is in government, the work that we do as healthcare professionals doesn't stop and it doesn't change. That recognition needs to continue, and the work needs to continue.

I think we will continue to see more attempts to close the

difference between federal-level and state-based healthcare activity. The Commonwealth government and the states and territory governments are usually responsible for different parts of healthcare, and now we have the National Health Reform Agreement (NHRA). One of the commitments in the NHRA is actually to bring all of the states and territory governments together with the Commonwealth government to see how we can better achieve collaboration.

The strengthening of Medicare is ongoing and now we have a seat at the table for the very first time in the history of pharmacy. There's also the Primary Care 10-year Action Plan that is ongoing. I think the health system will continue to face more and more pressure with the aging population and their increased healthcare needs and we will continue in 2025 to see how the evolution of pharmacy practice will continue to support this." ••





Bousquet J et al. J Allergy Clin Immunol Prac 2018;6(5):1726-1732 (Funded by Meda Pharma GmBH and Co KG)



INDUSTRY INSIGHTS:

PIVOT TO GROWTH



Jim Margaritis, Teva's Vice President, APAC Cluster Head and General Manager for ANZ, reflects on the past year for the pharmaceutical company and his thoughts on the current state of the industry.

INTERVIEW BY JO-ANNE HUI-MILLER



Pharmacy Daily: How would you describe 2024 for Teva, and what were some of the major highlights of the year?

Jim Margaritis: For Teva, 2024 has been a year of significant progress as we continue executing our 'Pivot to growth' strategy globally. We're focused on driving innovation and sustainable growth, with a strong emphasis on R&D, supported by the groundbreaking work of our scientists at Teva's Global Research Centre in Sydney.

This year, we've seen exceptional momentum, achieving seven consecutive quarters of growth and a recent increase in our full-year guidance for 2024, the second raise this year. In the last three months, Teva's rating was upgraded by three of the leading ratings agencies, a reflection of our strategy's successful execution and renewed confidence in Teva.

In Australia and New Zealand, we are advancing the 'Pivot to growth' strategy, with plans to double our business in the next five years. Milestones this year include the successful launch of RIVAROXABANTEVA, and we're also preparing for the launch of Misty-Duo Allergy.

PD: Broadly speaking, what are your thoughts on the current state of the pharmacy landscape?

JM: Pharmacists are integral to the healthcare system, often serving as the first point of contact for patients. Their accessibility and expertise make them essential in managing health concerns, from minor ailments to managing chronic conditions.

The recent announcement by Minister Butler at the Pharmacy Guild Annual Dinner, establishing a new Master of Pharmacy program granting the title of Doctor of Pharmacy, is a significant step forward in expanding pharmacists' scope of practice.

PD: What are some challenges for the pharmacy industry and community pharmacists?

JM: The pharmacy industry faces significant challenges, including supply chain issues due to Australia's lower medicine prices. Community pharmacists are also contending with recruitment and retention pressures in rural and remote areas, which can limit access to essential

THE PHARMACY INDUSTRY FACES SIGNIFICANT

CHALLENGES, INCLUDING SUPPLY CHAIN ISSUES."

services in underserved communities.

We see pharmacists as key partners in ensuring patient awareness, understanding, and adherence to treatments, and we look forward to continuing to build strong collaboration to benefit patients.

PD: What are Teva's plans for 2025?

JM: In 2025, we will continue to execute our 'Pivot to Growth strategy' globally.

Locally, key initiatives include launching an innovative treatment for motor neurone disease and expanding our high-impact generic launches.

We'll also leverage the pioneering work of our world-class R&D Centre of Excellence at Macquarie Park to drive innovation and growth. It's an exciting time ahead, with the potential to drive meaningful advancements in healthcare and create a lasting impact on patient outcomes. ••



Pharmacy Daily: What were some of the most interesting challenges for the rural health care sector in 2024? What do you wish the broader community understood about the region?

Susi Tegen: Rural people cannot understand why they do not have the same access to care that urban people do, and why this is not important to urban Australia. How does one connect and increase understanding that 7 million people do not have equitable access to healthcare?

I don't think Australians in general realise that our country needs rural Australians for our wellbeing. They produce two-thirds of Australia's export income, 50% of tourism income and 90% of the food Australians eat, even though they make up only 30% of the population.

There is anger and frustration growing in rural Australia, where access to healthcare and other services has diminished, such as healthcare, banking, affordable fresh fruit and vegetables and education.

It is not unusual for people to forgo healthcare rather than travel several hours and sometimes hundreds or thousands of kilometres to access care.

There is often a disconnect between

policy and funding of government with what is needed on the ground, so we have policy and funding that don't fit or work according to need and situation.

PD: What were some of the most positive changes that you saw for the rural health care sector this year?

ST: Cross-industry collaboration across health, industry, education, local government. In rural Australia, you cannot afford to work alone. If one fails, the others will very soon after.

I have also seen a change in some government departments, where individuals have taken the time to discuss and plan around the impact of collaboration. You can do without this in the city due to numbers in the population. You cannot do this in rural communities. Why not learn and collaborate? It makes sense.

There are some amazing entities and individuals who are innovative, positive and achieving great things in health despite being underfunded. The recent National Rural Health Awards and National Rural Health Month are examples of this. We often promote these because rural Australia is not down and out, but resilient and amazing, often humble and active.

PD: What kind of support do you think regional pharmacists need and what change would you like to see?

ST: There is a real need for a continuous relationship and multidisciplinary approach to meet the needs of rural patients, who are already challenged health-wise, but also have to deal with the impact of drought, floods, fires and storms.

The things that would give pharmacists access to be part of a multidisciplinary team for patients include:

- Funding that is fit-for-purpose and for pharmacists working within a residential aged care facilities;
- Rural pharmacies and primary care pharmacies within a multidisciplinary team need to allow for patient access to MBS so that they can access pharmacists;
- Equitable access to support and funding.
 We have seen pharmacists in the same
 town receive different treatment in
 funding and support, despite being
 around the same size and serving
 a vast region; and
- Scope of practice legislation needs to be the same across all states and territories and support the population and situation. »



PD: What news or trends will be on vour radar to look out for in 2025?

ST: The global political situation - wars, misunderstanding and alliances - will be under pressure, which will affect rural communities that are in the global market in agriculture and primary industry, mining and energy, tourism, education. These all impact our rural communities who bring in so much of our wealth. It will be demonstrated in mental health, financial distress and health and wellbeing in general.

The rapidly changing weather patterns and their socio-economic impact. Rural communities are resilient, but fires, floods, droughts and storms impact their livelihood, homes and families. It will show up in cities as \$12 for a kilo of bananas, \$14 a lettuce and road closures and isolation, before long rebuilding.

The Federal Election. I hope that we can come out of the election process with a genuine willingness to take responsibility for all Australians, and ensure that equity prevails in funding of rural health equitably. I hope there will be a focus on all Australians, not



INTERVIEWS

THERE IS ANGER AND FRUSTRATION GROWING IN RURAL AUSTRALIA, WHERE ACCESS TO

HEALTHCARE AND OTHER SERVICES HAS DIMINISHED."

on oneself. It is time. We cannot keep focusing on "what's in it for me?". At some stage we lost that Australian spirit, although I still see it in rural Australia.

I want to see corporates taking real responsibility for the communities they work in. Not just sponsorship of a sporting club, but real long-term support, such as housing for health and medical students; support with infrastructure or extensions to services; employment of clinicians that support communities. Some communities have fantastic partnerships, others are wanting. ••

















From opening its 600th pharmacy to launching innovative

digital initiatives, it has been a big year for TerryWhite Chemmart. Here, Executive General Manager **Nick Munroe** shares his insights from 2024 for the business and their plans for the future.

INTERVIEW BY JO-ANNE HUI-MILLER

Pharmacy Daily: What were some of the most significant milestones for TerryWhite Chemmart this year?

Nick Munroe: It has to be said firstly, that the milestones for TerryWhite Chemmart (TWC) are the achievements of and a testament to the incredible work of our network partners and their teams of pharmacists and pharmacy assistants.

A standout moment was in March when the network was recognised as Retailer of the Year by industry publication Inside Retail, for the rollout and implementation of our CareClinic health services. This award placed community pharmacy alongside the top retailers in the country and reinforced the vital role our pharmacists play in improving community health outcomes every day.

We were also proud to support more than 120 pharmacists as they completed training for the Queensland full scope prescribing pilot. Our support included financial assistance, study workshops, and practical in-store guidance, enabling pharmacists to implement these services with confidence. Seeing Therese Lambert from TWC Sarina become the first TWC pharmacist to deliver full scope prescribing in her community was a proud milestone for all of us.

Another highlight was celebrating the opening of our 600th pharmacy in

Bayswater, Victoria, in July. Welcoming pharmacy owner Tam Nguyen to the network was a wonderful moment, reflecting the strength of our support for owners striving to deliver exceptional care at their full scope.

PD: How did TWC perform this year?

NM: This year, TWC delivered strong results, underscoring the network's commitment to supporting their communities. During flu season, our pharmacies captured over 20% market share in vaccinations, solidifying their position — and community pharmacy more broadly — as trusted destinations for high-quality healthcare. Beyond flu vaccinations, we saw significant growth in other key vaccines, particularly whooping cough, driven by our partnership with the Immunisation Foundation of Australia. »



The dispensary remains the core of every pharmacy, and this year, TWC outpaced market growth for scripts. All categories performed well, with additional focus on supporting patients with complex medicines and developing unique ways in which we can support patients on their medical weight loss journey, both of which are delivering exceptional results.

On the retail side, we achieved strong growth across key categories, bolstered by the introduction of exclusive ranges such as NutraBalance, Georgiamaine, and Hydra Longevity, alongside 62 new TWC-branded products designed to provide exceptional value to customers.

This success spans our expansive network of over 600 pharmacies, both in-store and online, where e-commerce continued to thrive, with consistent month-on-month growth across scripts and front-of-store categories - and with the launch of two-hour fast delivery, we're continuing to focus on meeting customers where they are, when they need care. Additionally, we reached a major milestone with 2.4 million members in our Rewards Plus program, further enhancing customer loyalty and engagement.

PD: How would you describe the current pharmacy retail landscape?

NM: The pharmacy landscape is increasingly competitive and continues to evolve rapidly. Patients and customers are expecting more from community pharmacies than ever before. With the healthcare system under increasing pressure, pharmacies are playing a larger role in providing accessible, immediate care. This shift has led to rising expectations for pharmacies to deliver not only traditional dispensing services, but also a broader range of health services, such as vaccinations, health checks, and prescribing for minor ailments.

Convenience is another key factor driving expectations. Patients now look for seamless, integrated experiences, from online script management and telehealth consultations to in-store clinic services and home delivery options. As more people begin their healthcare journey online, community pharmacies are also expected to have a strong digital presence, offering e-commerce solutions and health apps



THEY EXPECT PHARMACIES TO PROVIDE QUALITY PRODUCTS AT COMPETITIVE PRICES WHILE ALSO OFFERING PROFESSIONAL ADVICE."

that make managing medications and accessing healthcare more convenient.

Additionally, customers are becoming more value-conscious, especially in the current economic climate. They expect pharmacies to provide quality products at competitive prices while also offering professional advice and tailored recommendations that enhance their health and well-being. This combination of personalised care, expanded services, and convenience is shaping the evolving expectations of today's community pharmacy customers.

For pharmacy owners, being able to compete in this landscape means creating a real point of difference, and this needs investment across systems, people development and training, marketing, and physical infrastructure like automation to drive efficiency. The opportunity to do this as a single operator or a smaller banner is becoming harder, so looking at how a brand like TWC can support across these areas is an important consideration.

The expanding scope of practice also presents immense opportunities for

pharmacists to take on more advanced roles in healthcare delivery. At the same time, the rise of online healthcare means pharmacy owners must embrace digital solutions for prescriptions and e-commerce to meet shifting consumer expectations.

At TWC, we are committed to supporting our network by investing in initiatives that empower pharmacists and enhance the customer experience. This includes programs that assist pharmacists with their prescribing studies and uniting our full service offering under the CareClinic brand. CareClinic engages customers with accessible healthcare services, from vaccinations to UTI treatments and oral contraceptive supply, plus prescribing services where regulations allow.

We're also continuously improving our digital tools, including myTWC, to streamline script management, expand e-commerce capabilities, and enhance delivery options. Additionally, our industry-leading inventory management system, BuyBetter, enables pharmacies to source the right products at the best prices, helping to improve margins while delivering greater value to consumers. »





PD: What were some of the biggest changes in the pharmacy industry this year, and how did TWC respond?

NM: The signing of the 8th Community Pharmacy Agreement provided much-needed stability for the sector, offering clarity after months of uncertainty around 60-day dispensing. This stability has allowed pharmacy owners to reinvest in their businesses, with many expanding clinic spaces, integrating automation, and upskilling their teams to enhance service delivery.

The most significant industry shift has been the expanded scope of practice for pharmacists, including prescribing rights in Queensland. TWC has supported pharmacists through this transition with comprehensive training programs for all roles, including our Masterclass for pharmacists and interns and Academy for retail leaders and pharmacy assistants. This investment ensures our network is ready to deliver high-quality care and embrace new opportunities confidently.

PD: Are business support services becoming more important to pharmacy owners, and how can a pharmacy brand assist?

NM: Business support services have never been more critical as pharmacy owners face increasing complexity in both healthcare and retail. Evolving customer expectations, heightened competition, and the growing role of pharmacies as primary healthcare providers mean owners need robust, multi-faceted support to stay ahead. TWC has been providing solutions and is continuing to invest to help our network stay ahead.

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THE ROLE OF COMMUNITY PHARMACIES IS EXPANDING, WITH CUSTOMERS NOW EXPECTING A

WIDE RANGE OF CLINICAL SERVICES BEYOND TRADITIONAL DISPENSING."

Our approach is built on three pillars:

1. HEALTH LEADERSHIP AND INNOVATION

The role of community pharmacies is expanding, with customers now expecting a wide range of clinical services beyond traditional dispensing. Programs like CareClinic empower pharmacies to meet these demands by engaging customers with accessible services. We back this with best-in-class training, clear policies and procedures, and effective marketing to position each TWC pharmacy as leaders in their community. By supporting pharmacists to practice confidently at their full scope, we're helping to shape the future of healthcare delivery.

2. BUSINESS SUPPORT

Navigating the dual complexity of healthcare and retail requires tailored, data-driven business support. TWC provides pharmacy owners with dedicated business development managers who work closely to create customised business plans designed for growth. Industry-leading training programs like Masterclass and Academy help develop the skills of pharmacy teams, ensuring operational efficiency and excellent customer care.

Our investment in digital solutions, such as myTWC and BuyBetter, is designed to drive loyalty and streamline operations. myTWC supports pharmacies in delivering convenient, customer-centric services like online script management, e-commerce capabilities, and delivery options. Meanwhile, BuyBetter, our inventory management system, enables owners to optimise stock, reduce costs, and deliver better value to their customers.

3. RETAIL EXCELLENCE

As I mentioned earlier, customer expectations on their pharmacy experience now rival those they have for leading retailers. Accessibility alone is no longer enough to grow a pharmacy business. Customers expect seamless integration of in-store and digital experiences, allowing them to engage with their pharmacy on their terms and in their time.

TWC's exclusive product ranges, extensive private-label programs, and value-driven promotions enhance retail performance while meeting evolving customer needs and helping pharmacies deliver a competitive edge. >>



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s another year draws to a close and we consider what 2025 might look like, I want to reflect on some of the major developments in 2024 and focus our minds on the opportunity ahead.

Cost-of-living pressures have continued to bite. In my own pharmacies, I've seen the real toll this has taken on my patients. I'm pleased that we secured the 8th Community Pharmacy Agreement (8CPA) to give everyone certainty for the future. It balanced affordable medicines for patients, while ensuring a vibrant and growing community pharmacy industry, together with ameliorating some of the damage of 60-day-dispensing. The agreement represents a \$3 billion investment into community pharmacy and cheaper medicines for patients.

In a series of roadshows across the country, key stakeholders, staff and more than a thousand members attended face-to-face events with myself and National Vice President Anthony Tassone, chief 8CPA negotiator. We discussed the current and future state of the industry and examined the impact of the 8CPA.

The roadshows were also a chance to start encouraging pharmacists to explore what it will mean for them to offer new services to their patients, with full scope of practice announcements in all states and territories.

We want community pharmacists across Australia to seize this opportunity. Expanding the range of services provided under scope of practice reforms can benefit your community, your pharmacy and your patients.

Updates

Community pharmacy as we know it is evolving from being dispensary-only, despite how important it is, to include a growing range of primary health care services. All states and territories have now empowered community pharmacists to do more to treat patients' everyday health conditions and long-term condition management.

Since October, community pharmacies in all jurisdictions can treat women for uncomplicated urinary tract infections with a short course of antibiotics.

At the moment, different states have different rules. But we know that UTI is the second highest potentially preventable hospital admission. Providing patients with early intervention at a convenient time and location has the potential to reduce the pressure on GPs and other primary health providers - as well as on emergency departments.

What's next?

Your Guild will continue working with state governments to bring about greater consistency. Ultimately, we would like other states to see the positive impact of these changes in places like Queensland and commit to all conditions being available regardless of state borders – just like the vaccine rollout of the mid 2010s.

The Covid 19 Inquiry Report not only recommended greater harmonisation and simplicity but also praised the innovation resilience shown by the community

pharmacy sector during the pandemic.

It was professionally inspiring to see the sacrifices, hard work and ingenuity of our community pharmacy colleagues and the primary healthcare system recognised in this formal public review.

I know that this was a pivotal moment for community pharmacists who stepped up to provide treatment for their patients. It was also transformative in how patients perceive their community pharmacists – with one quarter of all vaccinations in the first part of 2024 now taking place in a community pharmacy.

To me, it crystallised the value that full scope of practice offers patients, community pharmacists and primary healthcare.

Take the leap

The Guild's research tells us that 82% of Australians trust their pharmacist to provide health advice for common, non-complex conditions. Making the most of this trust by building the number of services available via community pharmacy will benefit local communities — especially those in rural, regional and remote areas.

This change strengthens the role of community pharmacists in providing primary healthcare. It allows them to take a leading role in patient treatment, see a greater variety of patient conditions and we've seen it improve job satisfaction.

This is good news for patients and primary healthcare providers who are struggling to manage existing patient demand. »



82% OF AUSTRALIANS TRUST THEIR PHARMACIST TO PROVIDE HEALTH ADVICE FOR COMMON, NON-COMPLEX CONDITIONS."

The Guild will soon launch a range of resources for community pharmacists to support them to make the change. This will include example consulting room designs and layout best practice to make the transition as straightforward as possible.

Just this year, I returned to James Cook University to complete my qualifications as a prescriber.

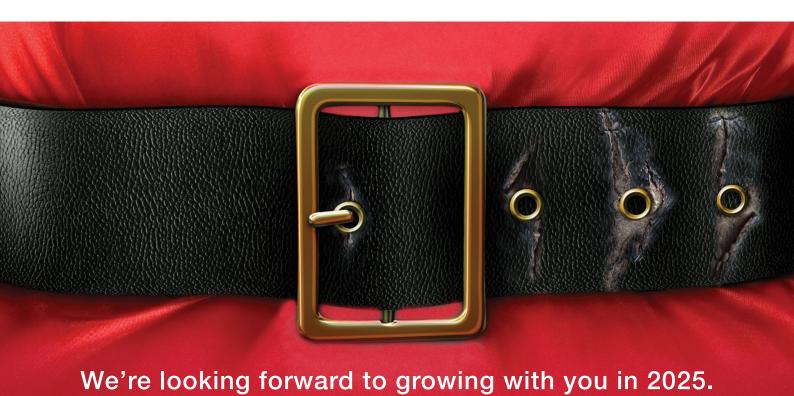
I am excited about what full scope of practice and the associated responsibility means for the next generation of pharmacists and pharmacy students. In the near future, we hope to be closer to the 7CPA and 8CPA promise of a Doctor of Pharmacy qualification being offered at our world-leading universities (Editor's note: this took place in Nov).

Graduates of these programs will be able to use their enhanced clinical training to offer more comprehensive care, including managing complex medication, health screenings, and managing chronic diseases. It opens a wider range of career opportunities and brings Australia into line with the qualifications available in other countries like the UK and Canada. It will be transformational for students, our sector, and most importantly, our patients.

Towards 2035

As you know, Australia's healthcare landscape is rapidly evolving, presenting both challenges and opportunities for community pharmacy. To ensure your Guild remains at the forefront of these changes and is aligned with your needs and interests, National Council, the governing body of the Guild, is developing a new strategic plan. 'Towards 2035' is our shared path forward, designed to strengthen community pharmacy, build on the successes from the current Centenary Strategic Plan, and ensure that the Guild is well-positioned to empower members to thrive.

'Towards 2035' is more than just a plan; it's a shared vision for a path forward that aims to strengthen the role of pharmacists as trusted healthcare providers in every community and in the hearts and minds of Australian patients. I look forward to you sharing your thoughts on this important plan through a series of members surveys and face-to-face consultation sessions over coming months. ••



As the festive season approaches, we'd like to take a moment to wish our wonderful pharmacy customers a very Merry Christmas! We know this time of year can be hectic, but rest assured, we're here to support you every step of the way. Thanks for your continued trust, and we look forward to being part of your success in the year ahead. Wishing you peace, joy, and plenty of holiday cheer!





JANUARY NEWS



LOOMING "HEALTH CRISIS" IN FACE OF OPIOID SHORTAGE

A "health crisis" is looming due to the increased shortage of opioid pain medication, warned Palliative Care Australia CEO Camilla Rowland.

An estimated 270,000 scripts of the discontinued drugs are filled each year, leaving thousands of Australians with limited options, particularly sick children, the dying and those living with chronic pain.

Health groups called on Federal Health Minister Mark Butler to force pharma companies to extend notice of discontinuations from six to 12 months, consult with clinicians, and review processes so alternatives can get PBS listing quickly and proactively look for alternative products.

The Australia and New Zealand Society of Palliative Medicine president Michelle Gold criticised the companies' discontinuation at such short notice.

"Surely they should have some moral obligation to ensure that people are not left without essential medications simply because a product becomes less profitable," she remarked.

MundiPharma, which supplies the medicines, said in a statement that the products were withdrawn "after careful consideration" and most have alternatives.

The issue was discussed at a medicines shortage action group meeting and the TGA approved a temporary supply of overseas equivalents for medicines such as Ordine, Jurnista and Dilaudid. ••

Pharmacists honoured on Australia Day

Several esteemed pharmacists around the country were recognised in this year's Australia Day honours.

Long-time PSA member and pharmacist, Dr Jennifer Gowan, was declared a Member of the Order of Australia (AM) in recognition of her significant contributions to community health and professional societies.

Regional NSW pharmacist Desmond Lum, hospital pharmacist Julie Rose Adams, and the Guild's Senior Media Advisor Peter Waterman were also recognised with a prestigious Medal of the Order of Australia (OAM). ••

NEW 'LIFE-CHANGING' LISTINGS ON THE PBS



Australians who have advanced ovarian cancer, chronic lymphocytic leukaemia (CLL), small lymphocytic lymphoma (SLL), cystic fibrosis and atypical haemolytic uraemic syndrome (aHUS), now have access to cheaper medicines under the Pharmaceutical Benefits Scheme (PBS).

Olaparib (Lynparza) has expanded to eligible Australian women with newly diagnosed advanced ovarian cancer and Acalabrutinib (Calquence) will now treat patients with previously untreated CLL or SLL.

Meanwhile, lumacaftor with ivacaftor (Orkambi) now includes treatment of one-year-old infants with cystic fibrosis for the F508del mutation, and Ravulizumab (Ultomiris) now treats patients with aHUS, a very rare genetic disease where the body's defence system attacks vital organs, blood cells and vessels.

Patients were previously paying anywhere between \$96,700 & \$384,800 per year for these treatments. ••

NEW VACCINE BOOKING TECH

VAXAPP, a pharmacy software platform with a vaccination eligibility engine, now automates vaccine suggestions at the time of booking. The tech is integrated with the National Immunisation Program Vaccines in Pharmacy (NIPVIP) Program.

By automating the eligibility process, VaxApp can ensure that patients are recommended the appropriate vaccines at the right time, streamlining the immunisation journey for patients and pharmacists.

"We are excited to offer pharmacies a tool that not only simplifies vaccine administration but also ensures adherence to the latest immunisation guidelines, in each state and territory of Australia," said VaxApp CEO Luke Renehan.

A free 60-minute demo for pharmacists is now available. ••

JANUARY NEWS



SCRIPTS FOR VAPING KICK OFF

From the start of the year, every doctor and nurse practitioner was given permission to prescribe therapeutic vaping products dispensed only through pharmacies, where clinically appropriate, with the commencement of a new Special Access Scheme pathway.

The Govt has committed \$29.5 million over four years for specialised programs and health service expansions to meet increased demand to support people to quit smoking and vaping arising from the new tobacco and vaping reforms.

These include new clinical guidance for health professionals on smoking and vaping cessation, building on the RACGP's work as well as the creation of an online cessation hub that contains information, tools, resources and linkages to direct people to the support mechanisms to assist them to quit smoking and vaping. ••

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FEBRUARY NEWS



Over the years, pharmacists have expanded the range of medicines that they can administer by injection.

In response, Pharmaceutical Defence Limited (PDL) has released a new guide to support pharmacists in the preparation and delivery of injectable services.

The PDL Guide to Medicines by Injection covers vaccinations such as influenza and COVID-19 vaccines, as well as newer medicines and administration routes, including vitamin B12, long-acting injectable buprenorphine and others.

According to PDL, the guide captures the key considerations pharmacists need

to take into account before providing injectable services, helping them to understand the risks involved and the key considerations before, during and after the injection has been administered.

Some of the errors that may occur when administering injections include choosing the incorrect vaccine for the wrong age group; errors with privacy issues; cold chain breach; or process and administrative errors.

The guide was designed for pharmacists and any other staff, including students, interns and pharmacy assistants and to help them successfully deliver the services. ••

STANDARD FOR PAIN MANAGEMENT

An updated Australian practice standard in pain management for pharmacy services was released by the Society of Hospital Pharmacists of Australia (SHPA) this month.

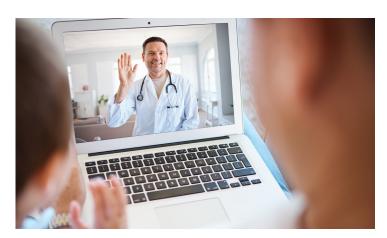
It details current best practice for the provision of pain management services, including analgesic stewardship services.

Lead author and former
Chair of the Pain Management
Leadership Committee Shania
Liu said the updated Standard
shows how best practice pain
management is achieved through
an interdisciplinary, collaborative,
person-centred approach where
pharmacists leverage their skills.

"Evidence shows that pharmacist involvement in pain management multidisciplinary teams, including pharmacist-led clinics for persistent pain, reduces adverse events, improves patient satisfaction, and lessens pain intensity," she said.

"Further, improving physical functioning and reducing the need for secondary healthcare."

Pharmacists can also help to reduce the prescribing of opioids at discharge and improve opioid de-escalation plans, she said. ••



DOCS ON DEMAND VIA TWC

TerryWhite Chemmart (TWC) has partnered with telehealth provider Hola Health to offer on-demand GP appointments.

The new service is integrated with TWC's Health Engine platform, website and app, offering customers access to various health services through the CareClinic program.

TWC has also joined forces with DoorDash, introducing a two-hour delivery service across nearly 400 pharmacies within its network.

The initiative complements its existing local delivery service and aims to ensure customers' pharmacy needs are promptly met, covering the entire e-commerce range and most pharmacy prescription medications. ••

FEBRUARY NEWS



GENDER DIVERSE TRAINING

James Cook University now offers a training program to help pharmacists support transgender and gender-diverse (TGD) people, off the back of research that revealed the unfair treatment that many experience in some pharmacies.

James Cook University PhD candidate Mrs Swapna Chaudhary recently explored the topic in the International Journal of Pharmacy Practice and found that while many of the pharmacists she spoke with recognise their role in caring for TGD patients, many lack confidence in offering quality support.

"Challenges faced by TGD people in healthcare settings, including community pharmacy, are widely recognised," she said.

"Even though pharmacies provide various pharmaceutical services to TGD people, many report encountering several obstacles to receiving competent care."

"This training program enabled pharmacists to be introspective and observe their own attitudes, behaviours, and practices."

However, Chaudhary recommends that regular training and updated resources around gender-affirming therapies are necessary for pharmacists to retain their knowledge and skills. ••

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MARCH NEWS



BEST OF THE BEST CELEBRATED

The Pharmacy Guild announced the winners of the prestigious 2024 Pharmacy of the Year awards, with Capital Chemist Southlands in the ACT taking out the overall prize.

It also won the Excellence in Business Management category, for its medicinal cannabis services among other extended scope of practice programs.

The Excellence in Community
Engagement category was won by Emerton
Amcal+ Pharmacy from New South Wales
for its involvement with men's health and
diabetes care groups.

Narrabri Pharmacy in NSW won the Excellence in Professional Innovation award for its wound care and fatigue management services.

This year's APP also saw the introduction of a new category - Excellence in Harm Minimisation, which was taken out by Emerton Amcal+ Pharmacy, NSW.

The MIMS/Guild Intern of the Year 2023 title went to Christian Portelli from Pharmacy 777 in Karratha, WA, while Colby Diek took home The Pharmacy Guild of Australia/Maxigesic's Pharmacy Assistant of the Year 2023 Award.

>> A WATERSHED MOMENT AT APP2024

The 2024 Australian Pharmacy Professional Conference and Trade Exhibition (APP) kicked off with a watershed moment, when National Guild President Trent Twomey announced the industry was a step closer to shaking hands with the Federal Government on the Eighth Community Pharmacy Agreement (8CPA).

Pharmacy Daily spoke to Twomey about the Guild's momentous efforts to reach a Heads of Agreement on the profession's funding package, with the goal of delivering benefits to both pharmacists and patients. He revealed the Guild was "so close to signing and very hopeful of getting an 8CPA", with the agreement expected to help create a "bright future" for community pharmacy. ••

\$26 MILLIONIMPACT OF 60DD

Pharmacies lost an estimated \$26 million in revenue due to the implementation of tranche one of 60-day dispensing (60DD), according to StrongRoom AI.

In its sample data that covered 6,000 pharmacies around Australia, there was a 16.4% uptake of 60DD in Feb, and a 14.1% uptake during Jan this year.

The data further showed that while 44.82% of the uptake received no benefit from the policy, the remaining 55.18% did benefit from the 60DD policy change. PD's conversation with StrongRoom AI about the impact of the controversial policy on pharmacies so far was timely, with the article published just days after tranche two was announced. ••

NSW scope trial declared a success



NSW's scope of practice trial resulted in the delivery of 12,000 treatments, announced the state government.

Under the trial, which began in May 2023, patients were able to access treatment for uncomplicated urinary tract infections and receive repeat prescriptions for the oral contraceptive pill from their local pharmacist.

The trial included over 1,000 pharmacies and eventually expanded to include conditions like impetigo, shingles, and dermatitis.

These and other scope of practice reforms were expected to inject \$1.6 billion annually to the NSW economy in productivity gains and reduced healthcare costs.

The Pharmacy Guild's NSW branch President, David Heffernan, said the reforms helped to ease the pressure on emergency departments and GPs. ••

APRIL NEWS



As Australia grappled with its worst flu season on record, the Guild teamed up with the Federal Government to ensure the protection of the country's elderly population. An expansion of the National Immunisation Program Vaccination in Pharmacy (NIPVIP) program meant pharmacists could start administering free flu vaccinations at aged care facilities from 29 April.

It was a pivotal move, given the 40% rise in flu cases compared to last year, reflected

in data from the Department of Health. Upon announcing the news, Nick Panayiaris, the Guild's National Vice President, stated "the Guild and the Government have worked together, and important changes have now been made to NIPVIP to protect vulnerable Australians during this nasty flu season".

He added, "lifting remuneration to meet the rising costs of service delivery allows pharmacists to continue delivering critical vaccination clinics". ••

A FIRST FOR PHARMACY INFORMATICS IN AUSTRALIA

The Society of Hospital
Pharmacists of Australia (SHPA)
introduced the first Australian
Practice Standard for pharmacy
informatics, helping to ensure the
quality and safe use of medicines
by supporting the implementation,
adoption and maintenance of
health information systems.

The move marked a major step forward in improving patient health outcomes within pharmacy practice, with the new standard expected to foster detailed knowledge of whole health system medication utilisation, as well as

a deep understanding of digital health, among pharmacy informaticians.

The Pharmaceutical Society of Australia was one of several organisations who played a key role in bringing the new standard to life, by providing insights as part of the review process. ••

A PD EXCLUSIVE: WA GROUP AMONG

WA GROUP AMONG FIRST TO STOCK VAPES

Pharmacy Daily spoke to one of the first pharmacy groups to begin stocking therapeutic Nicotine Vaping Products (NVPs), in line with the Federal Government's new vaping laws.

In a bid to help people quit smoking, Michael's Chemist Group made the move to sell the Wild by Instinct range of NVPs – one of the brands included in the TGA's online Vaping Hub – at its locations across Western Australia.

"It's not just a business decision - we see NVPs as a genuine way to help people quit smoking and reduce smoking rates within our community," said the company's owner, Michael Spartalis.

He also explained how it was important that more pharmacies begin to stock NVPs in order for the Government's prescription model to be effective. ••

>>

GUILD CALLS ON ACCC TO SCRUTINISE CW SIGMA MERGER

The month concluded with the Guild voicing its concerns over the proposed merger between Sigma and Chemist Warehouse in an official submission to the Australian Competition and Consumer Commission (ACCC).

The industry body emphasised that community pharmacy "prioritises patient care over profit" and – while acknowledging the role of franchising in supporting community pharmacies – cautioned against "increased corporatisation" within the sector.

In its submission, the Guild highlighted the unique nature of medicines, which it said should not be treated as "ordinary items of commerce". It also called for regulatory scrutiny to ensure compliance with the ownership laws that govern pharmacist control over pharmacies.

The Guild's statement came in response to a call-out from the consumer watchdog for industry feedback regarding the proposed mega-merger. ••

MAYNEWS



LARGE SCALE DATA HACK AT MEDISECURE

MediSecure, a prominent e-script provider, was the victim of a significant ransomware attack that compromised personal and health information, prompting the company to shut down its website and issue a statement about the breach.

As a prescription exchange service that plays a critical role in electronic prescribing and dispensing, MediSecure stated it had taken urgent steps to mitigate the impact, attributing the origin of the breach to a third-party vendor.

The company worked with the Australian Digital Health Agency and the National Cyber Security Coordinator to manage the aftermath of the incident, with the Australian Federal Police also involved.

It is estimated that about 12.9 million individuals may have had their data breached as a result of the hack.

The incident came after a previous significant breach in Oct 2022 when Medibank's customer data was compromised, affecting millions. ••

BUDGET MAKES MEDS MORE ACCESSIBLE

The 2024-25 Commonwealth Budget introduced financial relief measures aimed at assisting patients and community pharmacies.

Key among these was the freeze of PBS co-payments, preventing annual CPI indexation for one year for all Medicare patients, and up to five years for pensioners and other concession card holders.

Additionally, pharmacies are set to receive a funding boost of \$151.1 million over five years for the provision of Dose Administration Aids (DAAs), plus an extra \$45.6 million in 2028-29.

A further \$333.7 million was slated for the Aged Care On-site Pharmacists program, embedding credentialed pharmacists in aged care facilities, with funding also confirmed for pharmacists to deliver vaccination services in aged care and disability homes.

In addition, all PBS medicines dispensed by a community pharmacy, hospital, or approved prescriber will now be covered by the Closing the Gap PBS co-payment, making essential medicines free or cheaper for First Nations people. ••

Senate inquiry hearing into vaping

The Senate's Community Affairs Legislation Committee held a two-day inquiry into the Therapeutic Goods and Other Legislation Amendment (Vaping Reforms) Bill 2024, hearing from stakeholders including pharmaceutical companies, health bodies, retailers and vape users.

Key speaker Wilhelm David, CEO of therapeutic vape supplier From the Fields Pharmaceutical, argued for supporting the definition of therapeutic vapes versus recreational vapes and continuing the supply of fruit-flavoured nicotine vapes, and the availability of single-use disposable therapeutic vapes.

He also supported medical practitioners and pharmacies being able to promote smoking cessation that includes therapeutic nicotine vaping products.

The Australian Medical Association, the Royal Australian College of General Practitioners and the Pharmacy Guild of Australia backed federal legislation aimed at restricting the sale, supply and manufacture of nontherapeutic vapes.

"Community pharmacies continue to support evidence-based smoking-cessation and nicotine-dependence treatments, and individuals are more likely to guit for good when counselled by health professionals like pharmacists, doctors and nurses," said Guild President Trent Twomey. ••

\$10K BOOST FOR

TAS HOSPITAL PHARMACISTS



A new initiative to support hospital pharmacists in Tasmania was announced by the state's then health minister, Guy Barnett.

A \$10,000 per annum market allowance, effective 01 Jul, was approved for all pharmacists employed across the Tasmanian Health Service including in the Statewide Hospital Pharmacy, in accordance with the Allied Health Professionals Public Sector Unions Wages Agreement 2022.

"We highly value the important work that pharmacists perform in our hospital system, and their vital role in supporting patient care and safety, which is why we are acting to attract more," Barnett said.

The Pharmaceutical Society of Australia's Tasmania branch President David Peachey stressed the importance of adequate staffing in public hospitals for improving patient care.

He pointed to the need for a health system that recognises the role of hospital pharmacists and allows them to practice at their highest capacity, including through partnered pharmacist medication charting. ••



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JUNENEWS

PHARMACY GUILD, GOVERNMENT SIGN 8CPA

On O3 Jun, the Pharmacy Guild of Australia and the Australian Government signed the Eighth Community Pharmacy Agreement (8CPA). The signing ceremony marked the conclusion of nine months of negotiations.

Key provisions in the 8CPA included a phased-in \$1 discount on prescriptions, frozen PBS co-payments for up to five years, additional payments for dispensing 60-day prescriptions, and a 30% funding boost for healthcare programs like Dose Administration Aids and MedsCheck.

The new agreement also provides increased support for regional pharmacies.

Guild President Trent Twomey praised the agreement's impact on cost-of-living relief and its reinforcement of pharmacies as essential healthcare hubs.

Lead negotiator Anthony Tassone described the 8CPA as a win for Australians reliant on local pharmacies.

The 8CPA took effect on 01 Jul 2024 and will run until Jun 2029, bringing much certainty to the profession, allowing peak bodies to implement the full scope of practice. ••



The Senate passed the Therapeutic Goods and Other Legislation Amendment (Vaping Reforms) Bill 2024, introducing stricter controls on e-cigarette and vape sales to prevent access by minors.

The bill, aimed at reducing youth nicotine addiction, permits adults over 18 to purchase vapes from pharmacies, while those under 18 will require a prescription.

Assistant Minister for Mental Health, Emma McBride, highlighted the focus on smoking cessation.

"We're ensuring that adults seeking help to quit smoking can consult pharmacists for alternatives," she said, adding that buyers will need to show ID.

The bill includes limits on nicotine content and mandates clinical-style packaging to discourage youth appeal.

The Pharmacy Guild of Australia and the Pharmaceutical Society of Australia opposed the amendments.

A Guild spokesperson criticised the arrangement as a "dirty Senate deal," calling it "insulting" to turn pharmacies into "vape retailers and garbage collectors" under the new regulations.

By Nov, the majority of pharmacy groups still refused to stock vapes, as the products are not ARTG-listed and go against public health policies. ••

ACCC FLAGS CONCERNS ABOUT SIGMA CW MERGER

The Australian Competition and Consumer Commission (ACCC) raised initial concerns over Sigma Healthcare Limited's proposed acquisition of Chemist Warehouse Group Holdings in a Statement of Issues released in late Jun.

The ACCC highlighted potential competition impacts, as the deal would merge Chemist Warehouse, Australia's largest pharmacy chain by revenue, with a major wholesaler supplying thousands of independent pharmacies that compete directly with Chemist Warehouse.

"This is a significant structural change for the pharmacy sector," said ACCC Commissioner Stephen Ridgeway. ••

King's Birthday Honours

The 2024 King's Birthday Honours list celebrated key figures in public health and community pharmacy for their exceptional service and contributions.

Prof John Skerritt, former head of the Therapeutic Goods Administration, was appointed a Member of the Order of Australia for his significant impact on public health and scientific research.

Skerritt, who retired last year, served as Deputy Secretary of the Health Products Regulation Group from 2015 to 2023, overseeing the safety and efficacy of therapeutic products across Australia.

His role as an Adjunct Professor of Pharmacy at the University of Canberra further reflected his commitment to advancing pharmacy education.

Victorian pharmacist Robert James Dean received the Medal of the Order of Australia for his outstanding service to Red Cliffs, where he managed Dean's Pharmacy from 1957 to 2007. Similarly, pharmacist Farag Bassili Gobran was honoured for his long-standing dedication to youth, aged welfare, and the Egyptian community since 1970, leaving a lasting impact on healthcare and social support programs. ••

JULYNEWS



LEADERSHIP CHANGES ACROSS AUSTRALIAN PHARMACY ORGANISATIONS

In July, Associate Professor Fei Sim was re-elected as National President of the Pharmaceutical Society of Australia (PSA) for a third term, solidifying her role in advancing pharmacy advocacy.

She was joined by Professor Mark Naunton and Caroline Diamantis, who took on roles as National Vice-Presidents.

The PSA Board also appointed Bridget Totterman as Chair of the Membership, Products and Services Committee and welcomed Dr Amy Page from Victoria as a new Board Director.

Meanwhile, the Australasian College of Pharmacy appointed Amanda Seeto as its new CEO, taking over from Melanie Hunt.

Seeto highlighted her commitment to advancing the College's educational offerings, particularly as community pharmacy expands its scope.

Additionally, Sebastian Harper from Griffith University was elected President of the National Australian Pharmacy Students' Association (NAPSA) for 2024/25. Harper, previously NAPSA's Treasurer, succeeded Bano Serhan, who stepped down to pursue further studies. ••



Pharmacy Careers Summit highlights rising salaries, staffing challenges

At the 2024 Pharmacy Careers Summit (PCS24), organised by Raven's Recruitment, nearly 1,700 attendees joined to discuss the evolving role of pharmacists.

Key speakers included leaders from the Society of Hospital Pharmacists of Australia, the Pharmaceutical Society of Australia, and the Pharmacy Guild of Australia, all of whom emphasised the need for inter-organisation collaboration to advance the profession.

The Raven's Recruitment's Pharmacy Salary and Market Report 2024 was also launched and revealed that pharmacist salaries for permanent roles have risen over the past three years but are now stabilising.

Heidi Dariz, General Manager at Raven's, noted that pharmacists are increasingly prioritising permanent roles offering stability amid rising living costs.

Rural positions providing comprehensive accommodation packages have become more appealing.

Locum rates, which surged during the pandemic, have adjusted downwards as demand eased.

Despite concerns that 60-Day Dispensing would reduce job demand, vacancies have risen due to pharmacists' expanding clinical roles.

But delays in processing visas for overseas-trained pharmacists continue to impact rural staffing needs. ••

KAPS EXAM REPLACEDWITH NEW MODEL

The Australian Pharmacy Council (APC) announced a major update to its pharmacy assessment by replacing the Knowledge Assessment of Pharmaceutical Sciences (KAPS) exam with the Overseas Pharmacist Readiness Assessment (OPRA).

The OPRA redesign introduced revised content areas, new question selection and scoring methods, and reduced both exam duration and fees.

The final KAPS exam was scheduled for Nov 2024, while OPRA will launch in Mar 2025.

The APC stated that it will continue to collaborate with subject matter experts to develop and review exam questions.

To ensure a smooth transition, the Council also commissioned a comprehensive pilot with delivery partners to test the new exam systems and enhance candidate experience. ••

VAPES SURRENDER SCHEME



The Federal Government implemented transitional arrangements to help pharmacies and other businesses comply with the new *Therapeutic Goods and Other Legislation Amendment (Vaping Reforms)*Act 2024, which banned certain vaping products from 01 Jul.

Under the Business Surrender Scheme, pharmacies could surrender specified quantities of now-illegal vaping goods without facing supply or possession charges.

It applied to businesses holding over 280 vaping devices, 1,800 vaping accessories, or 12,000ml of vaping substances.

The measures supported businesses in adapting to the new regulations, aligning with the government's goal to curb unauthorised vaping product distribution. ••

AUGUSTNEWS



WESFARMERS AMII RESULTS

Wesfamers reported strong growth in revenue across its health division and its Australian Pharmaceutical Industries (API) subsidiary, despite a significant reduction in COVID-19 anti-viral product sales.

The division reported a 5.9% revenue increase to \$5.62 million, with earnings for the year up 11% to \$50 million.

Sales growth across the Priceline retail chain was driven largely by expansion of the store network, along with promotional initiatives, growth in online sales and net acquisition of new in-store customers.

InstantScripts, which was acquired last year, continued to perform strongly with a 16% increase in transactions from the year prior. Further acquisitions included SILK Laser Australia, which is being integrated into Clear Skincare to create a larger presence in the MediAesthetics sector.

However, cost-of-living pressures saw sales for the Clear Skincare brand decline, while the company also incurred costs from the closure of 17 unprofitable clinics. ••



Tasmanian and ACT pharmacists can now administer RSV vaccines to pregnant women and those over 60.

Pharmaceutical Society of Australia (PSA) National President A/Prof Fei Sim called for other states to adopt similar measures, pointing out inconsistencies in vaccine administration regulations across the country.

Currently, pharmacist immunisers in Northern Territory and Western Australia can only administer RSV vaccines after a prescription has been issued. However. this isn't the case in South Australia, even when prescribed by a doctor.

Meanwhile, in other states, pharmacists have prescribed and administered thousands of doses of vaccines, explained Sim.

She advocated for a nationwide standard based on the Australian Immunisation Handbook.

In a related development, Western Australia expanded the role of community pharmacists to treat common conditions like shingles and acne, a move expected to improve healthcare access in regional and remote communities. ••

SHPA REBRAND

The Society of Hospital Pharmacists of Australia (SHPA) began trading this month as Advanced Pharmacy Australia (AdPha) to reflect a new era in patient care. The rebrand was in response to the increasing needs of patients, and a pharmacy profession outgrowing traditional workplace boundaries.

AdPha President Tom Simpson FANZCAP (Lead & Mgmt) said the organisation will continue to represent the voice of Australian pharmacists and technicians, but is now more inclusive - not all members are pharmacists and many do not work in hospitals.

"Hospital pharmacy is no longer contained by the four walls of our hospitals," he said. "Our members are on the forefront of innovation providing acute and urgent pharmacy care across care settings.

"The last decade has seen growth in pharmacy expertise in areas such as medicines regulation and digital health, while pharmacogenomics and advanced therapeutics will continue to change the way we care for our patients." ••

>> PAG SLAMS PBS DELAYS

Australian patients are facing significant delays in accessing new, innovative medicines, according to Amgen's latest Australian Patient Access Gap report.

On average, it takes 591 days from the time a medicine is registered with the TGA to when it is available on the Pharmaceutical Benefits Scheme (PBS). In contrast, patients in Japan wait 101 days, Germany 121 days, and the UK 167 days.

The average time for a Pharmaceutical Benefits Advisory Committee (PBAC) recommendation for a PBS listing is 6.6 months.

Leading causes for the delays include multiple resubmissions to PBAC, complex approval processes, limited resources, regulatory barriers, and negotiation delays.

The report called for reforms to address the delays, perhaps reimbursing new medicines within three months of regulatory approval, which could improve access to lifesaving treatments. ••

SEPTEMBER NEWS



September marked an important month for community pharmacists in several states and territories, with scope of practice expanded under government changes.

The reforms will allow trained pharmacists to treat a wider range of everyday health conditions, from wound management to ear infections, helping to take pressure off GPs and enable patients to access healthcare in a timely and convenient way.

Trials were bypassed in NSW, with

the expansion immediately made part of permanent practice, while in SA, the new program is expected to roll out in 2026.

Additionally, the newly elected NT Government committed to expanding pharmacy services through PSA's Pharmacy Scope of Practice program, which includes the prescribing of treatment for uncomplicated urinary tract infections, within the first 100 days of taking office.

Queensland followed suit, making a similar announcement in October. ••

PHARMACY WHOLESALER PLATFORM RAISES \$2M

Directo, an independent online marketplace connecting pharmacy buyers and sellers, announced it had raised \$2 million in funding to drive its next phase of growth.

At the time, the platform was already supporting more than 3,000 pharmacy retailers, connecting them to a network of 200 suppliers and wholesalers.

PD spoke to Directo Founder and Managing Director Gavin Upiter, who said the raise exceeded expectations.

"We have had a number of customers, including pharmacies and suppliers, express interest in becoming shareholders throughout our capital raising campaign," he commented.

Directo is aiming to transform Australia's \$20 billion annual pharmacy wholesale market by digitising the supply chain.

"With the additional funds, we are well placed to onboard more pharmacies and suppliers and integrate Al-driven solutions into our platform," said Upiter. ••

WESFARMERS BREAKS GROUND ON FULFILMENT CENTRE

Wesfarmers Health kicked off construction of its new API Cairns Fulfilment Centre, which will service more than 120 pharmacies in the Far North Queensland region when it opens in October 2025.

Pharmacy Guild National President Trent Twomey was at the groundbreaking ceremony, which was also attended by local dignitaries including Federal MP Warren Entsch and Cairns Deputy Mayor Brett Olds.

Once up and running, the new facility is expected to boost product availability, helping to make health and wellness products more accessible and affordable.

"Pharmacies play a critical role in Australia's healthcare system and rely on wholesalers like API to deliver medicines to our businesses," Twomey said.

"As the owner of pharmacies in Cairns, I'm excited by this larger, brand-new facility which will help me provide exceptional, timely service to customers." ••

HTA REVIEWED FOR FIRST TIME IN 30 YEARS

In September, the Federal Government released the first comprehensive review of Australia's Health Technology Assessment (HTA) system in nearly three decades.

Fifty recommendations were made to improve access to new health technologies, address inequities, and simplify HTA processes to improve participation from consumers and clinicians.

At the same time, the Government also unveiled the Enhance HTA Report, a companion document with 10 recommendations focused on boosting the consumer and patient voice in health technology assessments.

The Federal Government will draw on the HTA report to make health funding decisions, particularly through programs such as the Pharmaceutical Benefits Scheme, Medicare Benefits Schedule, and National Immunisation Program.

It will also inform Medicines Australia's five-year Strategic Agreement with the Government, serving as a roadmap for health technology funding and assessment. ••

OCTOBER NEWS





In October, UTI prescribing was harmonised across Australia after the Northern Territory approved community pharmacists to expand their services, bringing it in line with the rest of Australia and marking an important milestone in women's healthcare access.

The move meant that females around the country can now access treatment for uncomplicated urinary tract infections at community pharmacies nationwide, without needing a prescription.

"Women are busy mothers, carers, bosses who need timely, easy-to-access

relief to get on with their day and prevent long-term health complications," said Trent Twomey, National President of the Pharmacy Guild of Australia.

In many regions, women can already access resupplies of oral contraceptives, with some states even allowing pharmacists to initiate hormonal contraceptives.

With over 6,000 community pharmacies nationwide, the expansion supports the modern healthcare needs of Australians while reducing the burden on GPs and emergency departments. ••

TAS improves access to medicines

In welcome news for Tasmanians, the state government announced plans to authorise local pharmacists to dispense prescriptions issued by doctors and qualified healthcare professionals on the Australian mainland.

The Poisons Act 1971 is set to be amended in early 2025 to improve access to medication for Tasmanian residents.

In the meantime, Tasmanian GPs can apply for authority to prescribe certain medicines and have them dispensed by local pharmacists.

"These positive changes will, with appropriate safeguards, mean that Tasmanians can access medicines that have been legitimately prescribed by an appropriately qualified health professional interstate," said Tasmanian Deputy Premier and Minister for Health, Mental Health and Wellbeing, Guy Barnett.

He explained that the reform is in response to frustration around the current interstate prescribing regulations, expressed by Tasmanians who receive medical care from interstate practitioners, as well as visitors and recent arrivals who need access to medications. ••

A VICTORY FOR CONSULTANT PHARMACISTS

Signalling a positive shift for consultant pharmacists, the Pharmaceutical Society of Australia (PSA) announced the launch of a dedicated community to foster engagement and professional growth among the profession.

The move saw the peak industry body take over the Consultant Pharmacist Community of Specialty Interest (CSI), which had previously been outsourced to a team of interdisciplinary leaders.

PSA National President Associate Professor Fei Sim said it was the right time "to refresh the CSI to reflect our growing community of consultant pharmacists specialising in general practice, aged care and medication management".

She described the CSI as a forum for PSA members to connect with their colleagues, exchange ideas opportunities and resources, and grow their practice in a safe, professional environment.

Members can also complete workshops on relevant industry topics and contribute their insights to shape the Consultant Pharmacists Conference. ••



CHEMIST WAREHOUSE LAUNCHES IN DUBAI

Chemist Warehouse marked a huge milestone in October, announcing its expansion into the United Arab Emirates (UAE).

Located in the Al Ghurair Centre, the 1,000sqm superstore boasts a one-stop model, offering pharmacy dispensary services as well as leading Australian brands and local product offerings across the health, wellness, beauty, baby, cosmetics and fragrance categories.

The new store also stocks a luxury shopping selection featuring high-end fragrances and cosmetics, and is open seven days a week from 8am to midnight.

At the time, Chemist Warehouse Director, Mario Tascone, revealed the company was gearing up to open its second Dubai store in the near future.

The latest addition boosted the Australian pharmacy retail giant's portfolio of close to 600 stores worldwide, including more than 530 national stores, as well as 53 in New Zealand, 12 in China, and 11 in Ireland. ••

NOVEMBER NEWS



\$1.2 BILLION BILL GETS HEART PUMPING

Australia spends over \$1.2 billion per year treating people with high blood pressure, according to a study published in the *Medical Journal of Australia*.

Patients' out-of-pocket charges account for 40% of the bill, with the taxpayer footing the remaining 60% through government subsidies and industry contracts. Over half the cost (\$611 million) was pharmacy fees for dispensing and handling medications, with GP appointments and purchasing medicines from manufacturers costing \$342 million and \$221 million respectively during the 2021/22 financial year.

"Two things struck us immediately: how much of the cost is going through pharmacy, and that patients are carrying an unfair share of the overall burden," said Professor Anthony Rodgers of the George Institute for Global Health, the lead author behind the study.

"While our concession system helps some consumers, these are real costs for people on lower incomes," he said, noting that many are living with additional health problems and may have to "face difficult choices about what medicines or health appointments they can afford". ••

ACCC GIVES GREEN LIGHT TO SIGMA-CHEMIST WAREHOUSE MERGER

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The Australian Competition and Consumer Commission (ACCC) has announced that it will not oppose the merger of Sigma Healthcare Limited (ASX: SIG) and CW Group Holdings Limited after Sigma provided a court-enforceable undertaking.

"The ACCC found that, with the undertaking, the proposed merger is unlikely to substantially lessen competition," said ACCC Chair Gina Cass-Gottlieb.

"There is and will continue to be effective competition at all levels of the pharmacy supply chain, capable of constraining a combined Sigma Chemist Warehouse."

Gottlieb said the ACCC believes that it is unlikely that the merger will substantially lessen competition "because other pharmacies and non-pharmacy retailers will continue to compete to the same extent they compete now".

She noted that consumers would maintain choice, with Sigma's and Chemist Warehouse's distinct formats offering either smaller, personalised services or larger, discount-driven stores. ••

DOCTOR OF PHARMACY TITLE

LAUNCHES

This month, the Federal Health Minister, Mark Butler, announced the establishment of a new Masters of Pharmacy (Extended) qualification.

The change means graduates of the new Level 9 Extended Masters of Pharmacy degree will earn the title of Doctor of Pharmacy.

It elevates the profession in line with the recognition bestowed on other health professionals such as physiotherapists, podiatrists, optometrists and dentists.

Unfortunately, not everybody was happy with the news.

"The Australian Medical Association (AMA) feels very strongly that while the term 'doctor' is not protected, there are protections under AHPRA and the national law about holding yourself out to be a medical practitioner, and it's generally recognised that in clinical settings, the word 'doctor' implies medical doctor," AMA president Dr Danielle McMullen told Medical Republic.

"If you're not a medical doctor, that needs to be made very clear, and so we will be making sure that that's the case."••

NEW STANDARD FOR TRANSITIONS OF CARE

This month, Advanced Pharmacy Australia (AdPHa) released a new Pharmacy Standard to support better transitions of care.

According to Katie Phillips, Chair of Standard of Practice Working Group, patients who are given safe transition care are less likely to be readmitted to hospital and enjoy better outcomes.

"Improving medication safety during transitions of care is everyone's responsibility, and requires commitment and collaboration across all levels of the acute and primary care sectors," Phillips noted.

"Pharmacy services specialising in transitions of care are perfectly placed to lead the way, and transitions of care stewardship is now more than just a pipedream."

Medication-related adverse events occur in approximately 20% of patients after discharge, twothirds of which are preventable.

However, pharmacist-led interventions can lead to a major decrease in hospital and ED visits. ••



A BIG THANK YOU FOR SUPPORTING *PHARMACY DAILY*AND BEING PART OF OUR COMMUNITY.
SEE YOU IN 2025.