



## **SHPA's Victoria Branch Committee submission to the Capability Framework for Victorian Cancer Services Consultation, July 2023**

The Society of Hospital Pharmacists of Australia (SHPA) is the national, professional organisation for the 6,100+ Hospital Pharmacists, and their Hospital Pharmacist Intern and Hospital Pharmacy Technician colleagues working across Australia's health system, advocating for their pivotal role improving the safety and quality of medicines use. Embedded in multidisciplinary medical teams and equipped with exceptional medicines management expertise, SHPA members are progressive advocates for clinical excellence, committed to evidence-based practice and passionate about patient care.

SHPA convenes an Oncology and Haematology Specialty Practice stream, comprising of a network of almost 900 SHPA members who work to optimise best practice cancer care for oncology and haematology patients in inpatient, outpatient, ambulatory care or primary care settings where patients of any age receive pharmacy services. They promote and foster education, research and communication in cancer pharmacy related issues.

Clinical pharmacists are experts in complex medication management for people who are acutely unwell. Pharmacists providing oncology and haematology clinical pharmacy services are clinical pharmacists with expertise in cancer therapies, practicing within a hospital's multidisciplinary team with a key focus on promoting safe and effective use of cancer medications, reducing the incidence of serious adverse events and toxicities, and improving patients' cancer care. Depending upon the capacity and preferences of the hospital, Oncology and Haematology Pharmacists work with multidisciplinary committees to support effective governance including policies and procedures to drive improved patient care. Pharmacists managing the manufacturing of these cancer therapies are also clinical pharmacists with expertise in the compounding of cytotoxic medications.

SHPA's Victoria Branch Committee is therefore pleased to see considerable representation of pharmacy cancer services at varied levels of the Capability Framework for Victorian Cancer Services (the Framework) and welcomes the opportunity to provide feedback below.

If you have any queries or would like to discuss our submission further, please do not hesitate to contact Jerry Yik, Head of Policy and Advocacy on [jjik@shpa.org.au](mailto:jjik@shpa.org.au).

### **1. Capability framework for Victorian cancer services - Overall comments**

*Do you have any general remarks or overview comments about the whole document? Are there any major issues identified?*

SHPA supports the Framework's acknowledgement of chemotherapy pharmacy services as a specialty area of practice in recognition of its unique requirements, arrangements and expertise. The hospital pharmacy sector has long recognised chemotherapy pharmacy services provided to oncology and haematology patients as a specialty given the complexity and expertise required to provide safe and quality care to this at-risk patient cohort with expensive and high-risk medicines.

In order to meet the Framework's service requirements, SHPA recommends that there are specific workforce recruitment and retention strategies put in place. This includes the provision of training for clinical and compounding pharmacists that provide chemotherapy medicines and cancer services, to support safe and



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quality care for high-risk cancer patients, as outlined in SHPA's Standard of practice in oncology and haematology for pharmacy services.<sup>1</sup>

To support this, SHPA launched its Cancer Services Advanced Training Residency Program in 2021, an experiential learning pathway for specialty practice development in cancer services designed to develop pharmacists' practice towards Advanced Pharmacy Practice Framework Advancing - Stage II (Consolidation Level) performance and facilitate specialisation in Cancer Services. The aim of the ATR is to enable pharmacists to provide expert pharmaceutical care in this defined practice area. To date, 28 pharmacists in Victoria have completed or are completing an Advanced Training Residency, with this program continuing to provide Victoria with an increasingly highly skilled pharmacist workforce. However, this Residency is not currently supported by State or Federal funding which could be a barrier to health services meeting the Framework's service requirements.

In addition, SHPA believes the knowledge and clinical skills to administer anti-cancer drugs and safely handle hazardous drugs and related waste requires additional credentialing through courses such as eviQ Education's Pharmacy Anti-cancer Drug Administration Course (ADAC).<sup>2</sup> This course is currently being updated and being piloted across sites, including St Vincent's Hospital in Victoria, before final launch.

## **2. Capability framework for Victorian cancer services - Introduction (About this document)**

*Do you have any comments regarding the content of the 'About this document' section?*

SHPA anticipates that wider consultation with stakeholder such as SHPA is sought prior to the release of the Pharmacy Services Capability Framework mentioned in reference to the availability of the appropriate level of pharmacy services to support delivery of therapy.

### **Part A: Service Description**

#### **3. Overall feedback on all levels 1 to 6**

*Please provide your specific comments for All Levels of Part A - Service Description.*

Not applicable.

### **Part B: Clinical Workforce**

#### **4. Overall feedback on all levels 1 to 6**

*Please provide your specific comments for All Levels of Part B - Clinical Workforce.*

SHPA welcomes the Framework's suggestion of Level 4 and 5 access to specialist oncology pharmacists available for adult admitted patients and during extended hours.

While SHPA acknowledges that the Framework does not prescribe staffing ratios, we believe that reference to SHPA's Standard of practice in oncology and haematology for pharmacy services<sup>1</sup> is considered to aid health services in determine appropriate staffing levels for medical oncology inpatients, haematology inpatients and same-day admitted or home-based care patients. It defines the pharmacist-to-patient ratio that should not be exceeded to ensure the full suite of clinical pharmacy services are delivered to ensure safe and quality care for patients receiving chemotherapy.

However, SHPA notes that the majority of hospitals and health services are not sufficiently funded or resourced to provide comprehensive clinical pharmacy care for cancer patients. This means that instead of a 1.0 FTE cancer services pharmacist being responsible for 15-20 patients as per SHPA's standard, they are allocated a patient load of more than 20 patients, sometimes even over 50 patients depending on the hospital. SHPA believes this is inappropriate, as it means cancer services pharmacists with inappropriate patient loads are unable to provide the full suite of clinical pharmacy services described above.



This places the safety and quality of care for cancer patients at great risk. In the worst-case scenario, some hospitals and health services may not have any dedicated cancer services pharmacist at all, and any opportunity for clinical review and check for appropriateness of therapy rests with the dispensing and/or compounding pharmacist who are much less likely to have comprehensive access to patient clinical notes to inform care. This presents a major barrier to achieving the Framework's service requirements.

## Part C: Clinical Support Services

### 5. Overall feedback on all levels 1 to 6

*Please provide your specific comments for All Levels of Part C - Clinical Support Services.*

At level 2, SHPA supports a credentialed cancer pharmacist providing clinical verification services for all patients receiving Systemic Anti-Cancer Therapy (SACT), with increasing access to clinical trials pharmacists (if service includes clinical trials) and specialist oncology pharmacists for levels 4 and 5.

SHPA welcomes the inclusion of compounding services in Part C, however it is important to note that there are no specific compounding courses for pharmacists and pharmacy technicians that are available on a national scale, only a small handful of consultancies or hospitals that can provide training packages locally at request. Most commonly, hospitals must individually manage their own training and skills development for compounding pharmacists and pharmacy technicians.

Hospitals and other healthcare agencies are the major centres for clinical trials with investigational products and according to SHPA's Standard of practice in clinical trials for pharmacy services<sup>3</sup>, pharmacists in these institutions are involved with policies and procedures for the safe and ethical use of investigational products. A stronger specialist Clinical Trials Pharmacist workforce is necessary to meet Level 4 and 5 requirements of the Framework and in order to maximise Victoria's capacity to undertake clinical trials and improve the rate at which they are being opened and closed.

SHPA is a great advocate for research of medications, with a dedicated Research speciality practice stream comprised of research pharmacists, and a leading research journal 'Journal of Pharmacy Practice and Research (JPPR).' SHPA also provides a starter kit to support pharmacists wishing to embark on research, and funds research grants, practitioner grants and educational grants to support members in furthering research in their specialised fields of practice.

In addition, many Medicines Information services, led by specialist medicines information pharmacists, are having to close due to lack of funding. This could present as a potential barrier to ensuring the workforce to support these services are maintained in line with the Framework's requirements.

## Part D: Equipment and Infrastructure

### 6. Overall feedback on all levels 1 to 6

*Please provide your specific comments for All Levels of Part D – Equipment and Infrastructure.*

The compounding of chemotherapy medicines also requires significant infrastructure to support viability of this specialist service. There are regulatory challenges faced by hospital pharmacy compounding services that are significant, where costly changes are required to their compounding facilities based on changes to standards for manufacturing which are enforced by governing pharmacy bodies. These additional costs are challenging for larger urban hospitals to fund but are near on impossible for smaller regional, rural and remote hospitals and health services.

A rural hospital in Victoria reported that upgrades to their sterile compounding suite to meet current standards for manufacturing, would cost approximately \$75,000, but they could only make changes worth \$5,000 to date. The ever-changing standards of manufacturing, whilst important in providing patients with a high-quality



service, can also act as a barrier to service provision and access to cancer therapies, particularly to those in rural and remote areas.

## Part E: Clinical Governance

### 7. Overall feedback on all levels 1 to 6

*Please provide your specific comments for All Levels of Part E - Clinical Governance.*

Not applicable.

### Future of the framework

### 8. Can you recommend any existing data sources, processes, or other mechanisms that would be useful for evaluating or validating the levels within the framework?

SHPA's Standard of practice in oncology and haematology for pharmacy services<sup>1</sup> pharmacist to bed ratios could assist healthcare services in determining if staffing levels are appropriate within each level.

Workforce data may need to be gathered to determine if health services across Victoria are able to meet the service level requirements and provide the corresponding specialist skilled pharmacist workforce. This could identify service gaps and could target recruitment and educational strategies.

*The Department are seeking to minimise additional reporting or processes while ensuring the framework is successfully embedded in practice.*

### 9. Do you have any further comments you would like to make about the Capability framework for Victorian cancer services?

In addition to the reference made to the National Safety and Quality Health Service Standards (NSQHS) clinical governance for pharmacists in cancer care fact sheet, SHPA recommends reference to SHPA's Standard of practice in oncology and haematology for pharmacy services<sup>1</sup> to ensure the best possible cancer care is provided to all Victorians, as outlined above.

## References

<sup>1</sup> Coutsouvelis, J., Adams, J., Bortz, H., Chau, M., Chiang, K., Foo, J., Ibrahim, K., Kerr, K.-A., O'Connor, S., Powell, M., Rowan, G., Siderov, J., Tey, A., Tran, J., Vasileff, H. and Munro, C. (2020), Standard of practice in oncology and haematology for pharmacy services. J Pharm Pract Res, 50: 528-545. <https://doi.org/10.1002/jppr.1686>

<sup>2</sup> Cancer Institute New South Wales. eviQ Education. Anti-cancer drug administration course. Available at: <https://education.eviq.org.au/courses/anti-cancer-drug-administration-course-adac/anti-cancer-drug-administration-course>

<sup>3</sup> Slobodian, P., Challen, J., Ching, M., Hong, E., Nikolajevic-Sarunac, J., Shum, B., Vosk, C. and Munro, C. (2020), Standard of practice in clinical trials for pharmacy services. J. Pharm. Pract. Res., 50: 429-444. <https://doi.org/10.1002/jppr.1676>

