

Queensland Medicines and Poisons (Medicines) Amendment Regulation 2025 - Partnered Pharmacist Medication Prescribing

December 2024

Introduction

Formerly known as the Society of Hospital Pharmacists of Australia (SHPA), Advanced Pharmacy Australia (AdPha) is the progressive voice of Australian pharmacists and technicians, built on 80 years of hospital innovation that puts people and patients first. AdPha supports all practitioners across hospitals, transitions of care, aged care and general practice clinics to realise their full potential. We are the peak body committed to forging stronger connections in health care by extending advanced pharmacy expertise from hospitals to everywhere medicines are used.

Pharmacists as medicines experts operatively manage and clinically ensure the safe, efficient and effective use of medicines within Australia's hospital system. Pharmacists working to their full scope of practice are instrumental in alleviating pressures on medical colleagues, while pharmacy technicians, through efficient medication management and clinical support, enable pharmacists and nurses to dedicate more time to direct patient care and other clinical activities. Pharmacists and pharmacy technicians working to their full scope not only improves patient outcomes but also enhances health system efficiency.

The Final Report from the *Unleashing the Potential of our Health Workforce – Scope of Practice Review*¹ further validates these approaches, highlighting the importance of removing barriers to full scope of practice and strengthening multidisciplinary care to meet current and future health system needs.

AdPha supports the proposed amendment to the Medicines and Poisons (Medicines) Amendment Regulation 2025 to facilitate Partnered Pharmacist Medication Prescribing, outlining reasoning below.



If you have any queries or would like to discuss our submission further, please contact Jerry Yik, Head of Policy and Advocacy at ivik@adpha.au.

Response to Partnered Pharmacist Medication Prescribing proposed amendment

AdPha is represented on the Queensland Partnered Pharmacist Medication Prescribing (PPMP) working group and supports in principle the proposed amendments in Medicines and Poisons Amendment Regulation 2025 in facilitating Partnered Pharmacist Medication Prescribing (PPMP), which fosters advancements in the pharmacy sector for the benefit of patient care and Queensland's health system.

Challenges and pressures on the healthcare system, specifically on acute care in hospitals, has been increasingly demanding with Queensland public hospital emergency departments seeing the highest number of presentations ever recorded in 2022-23.

According to the Queensland Audit Office's Health 2023 Report 6: 2023–24², there has been a 10.3% and 12.4% increase in walk-in and ambulance arrival presentations respectively, over the last five years. It is concerning that all emergency department presentations are increasing faster than the population growth as shown in Figure 1. The report also reveals ambulance ramping at 43% with over 160,000 ambulance lost hours.

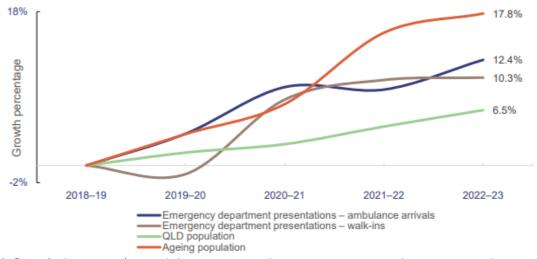


Figure 1: Cumulative annual growth in emergency department presentations compared to Queensland's population growth and ageing population growth from 2018–19 to 2022–23

Source: Queensland Audit Office's Health 2023 Report 6: 2023-24



Evidence summary of collaborative pharmacist prescribing in hospitals

Pharmacists undertaking collaborative prescribing, including the ordering and reviewing of medication-related baseline investigations, can significantly improve efficiencies in the healthcare system. This has been well-established in literature on Partnered Pharmacist Medication Charting (PPMC), the first iteration of collaborative prescribing in Australia.

The PPMC model was first implemented in Victoria at Alfred Health, and was found to significantly reduce the medication error per patient admission from 60.1% to 4.4% with a number needed to treat (NNT) of 1.8.³ PPMC has also reduced the proportion of inpatients with at least one medication error on their chart by 62.4% compared with the traditional medication charting method, while also reducing the length of inpatient stay by 10.6%.⁴

A Deakin University health economic evaluation⁵ of PPMC involving more than 8,500 patients found that it:

- decreased the proportion of patients with at least one medication error from 19.2% to 0.5%
- reduced patient length of stay from 6.5 days to 5.8 days
- saved \$726 per hospital admission

The perspectives of hospital medical and nursing staff on pharmacist prescribing are notably positive. Studies^{6,7} revealed that doctors and nurses acknowledge that pharmacist prescribing is beneficial in reducing medication errors and improving patient safety and flow. They also reported that pharmacist involvement in prescribing processes alleviated workload pressures, and its benefits outweighed the potential risk of de-skilling medical practitioners, with the collaborative approach providing valuable learning opportunities for doctors.

The success and support for this model has seen pharmacists expand to PPMP models which further extend pharmacist prescribing as part of a care team.

Investing in Workforce Innovation and Efficiency

PPMC/PPMP is increasingly becoming standard practice across Australian hospitals, and addresses barriers to workforce capacity, enhancing access to timely care, and modernises care delivery systems.

AdPha believes that a statewide implementation of PPMP aligns directly with Queensland's Charter, The Right Plan for Queensland's Future's⁸ priority to increase hospital efficiency and improve patient flow across health services. By investing in this program, the Queensland government has the opportunity to lead nationally in delivering a more sustainable and effective healthcare system.

The proposed amendment aligns with the Charter commitments to improve workforce sustainability, address critical service gaps, and innovate for a strong, well-functioning



health system as well as contribute to reduction in ambulance ramping through improved bedflow.

The proposed amendment also aligns with key priorities outlined in the *Strengthening Medicare Taskforce Report*⁹ and the *Scope of Practice Review Final Report*¹, both of which emphasise the importance of enabling health professionals to work to their full scope of practice within multidisciplinary care models.

Through the proposed amendment, AdPha strongly believes that hospital pharmacy services can play a vital role in achieving these goals while reducing costs and helping to deliver a world-class health system for all Queenslanders.

References



¹ Cormack.M, (2024). Unleashing the Potential of our Health Workforce – Scope of Practice Review: Final Report. Independent Review. Available at: https://www.health.gov.au/sites/default/files/2024-11/unleashing-the-potential-of-our-health-workforce-scope-of-practice-review-final-report_0.pdf
² Australian Medical Association. (2023). AMA submission to unleashing the potential of our workforce – scope

² Australian Medical Association. (2023). AMA submission to unleashing the potential of our workforce – scope of practice

review. Available at: https://www.ama.com.au/articles/ama-submission-unleashing-potential-our-workforce#:~:text=The%20AMA%20supports%20all%20health,patients%20and%20the%20health%20system.

³ Sinclair VL, Hitchen SA, Rawlins MDM, Tong EY. (2020). Validating the Victorian partnered pharmacist charting model in the Western Australian setting. J Pharm Pract Res.50(5):456-7.

⁴ Tong EY, Mitra B, Yip GS, Galbraith K, Dooley M, PPMC Research Group. (2020). Multi-site evaluation of partnered pharmacist medication charting and in-hospital length of stay. Br J Clin Pharmacol (Feb); 86(2): 285-90.

⁵ Deakin University. (2020). Health Economic Evaluation of the Partnered Pharmacist Medication Charting (PPMC) program. Available at: https://www.safercare.vic.gov.au/improvement/projects/mtip/ppmc
⁶ Tran T, Taylor SE, George J, Chan V, Mitri E, & Elliott RA. (2021). Pharmacist-assisted prescribing in an

Australian hospital: A qualitative study of hospital medical officers' and nursing staff perspectives. Journal of Pharmacy Practice and Research, 51(6), 472-479.

⁷ Tong EY, Yip G. (2024). Partnered pharmacist medication charting and prescribing in Australian hospitals. Australian Prescriber 47:48-51.

⁸ Queensland Government. (2024). The Right Plan for Queensland's Future. Available at https://cabinet.qld.gov.au/ministers-portfolios/assets/charter-letter/tim-nicholls.pdf

⁹ Australian Government Department of Health and Aged Care. (2023). Strengthening Medicare Taskforce Report. Available at: https://www.health.gov.au/sites/default/files/2023-02/strengthening-medicare-taskforce-report 0.pdf.