



**PHARMACY  
FORECAST  
AUSTRALIA  
2022**

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**JULY 2022**

**EXECUTIVE  
SUMMARY**



PHARMACY FORECAST AUSTRALIA PARTNER

# ACKNOWLEDGMENTS

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The Pharmacy Forecast Advisory Committee thanks members of the American Society of Health-System Pharmacists (ASHP) for their ongoing collaboration in the strategic growth of *Pharmacy Forecast Australia*: **Barbara Nussbaum**, B.S.Pharm., Ph.D., Vice President for Research and Education, ASHP Foundation™; **David Chen**, R.Ph., M.B.A., Assistant Vice President for Pharmacy Leadership and Planning, Pharmacy Practice Sections; **Eric Maroyka**, Pharm.D., BCPS, Director, Center on Pharmacy Practice Advancement Center on Pharmacy Practice Advancement; and **Douglas J. Scheckelhoff**, M.S., FASHP, Senior Vice President, Office of Practice Advancement.

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# INTRODUCTION

The Society of Hospital Pharmacists of Australia (SHPA) is pleased to provide this Executive Summary of the 2nd edition of *Pharmacy Forecast Australia*, a strategic thought leadership piece on emerging trends and phenomena forecasted to impact pharmacy practice and the health of Australian patients to 2027.

After another disruptive year in healthcare, it is unsurprising to see new themes arise in mental health and workplace wellbeing, hospital and health funding models and environmental sustainability, capturing the zeitgeist amid Australia's move toward 'living with COVID-19'.

Through its independent authorship, *Pharmacy Forecast Australia 2022* aims to equip Hospital Pharmacy departments to proactively position themselves and their teams for potential future events and trends through contextualised recommendations. On behalf of our profession, we are pleased to see an emergent energy in Australia's fastest growing pharmacy sector, following two years of pandemic outbreaks, lockdowns and resulting stress, fatigue and burnout.

Hospital Pharmacists are already Australia's 'captains of medicines', managing almost one quarter or \$3 billion of the annual PBS budget, and research continues to build that shows Hospital Pharmacist-led medication management services can reduce hospital readmission rates and medication-related hospital admissions, which cost our health system \$1.4 billion each year.

As we look to the future, equipped with the lessons of the recent past, SHPA will utilise the crowd-sourced wisdom of our independent Forecast authors to continue advocating for a more sustainable, expert workforce, that is present wherever there is medicines risk.



A handwritten signature in black ink, appearing to read 'Peter Fowler'.

**Peter Fowler**  
President



A handwritten signature in black ink, appearing to read 'Kristin Michaels'.

**Kristin Michaels**  
Chief Executive

# METHODOLOGY

*Pharmacy Forecast Australia* grew from the relationship between SHPA and the American Society of Health-System Pharmacists' (ASHP), whose Pharmacy Forecast has grown over the past decade to become a key feature of the society's educational landscape.

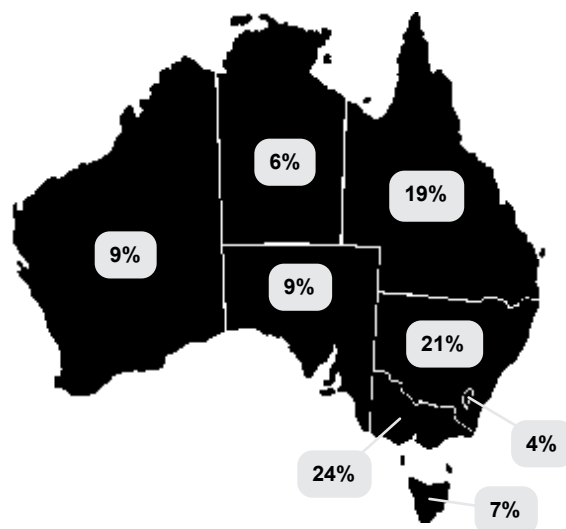
Drawing on concepts described in James Surowiecki's book, *The Wisdom of Crowds*, groups of diverse individuals – in which each participant's input is provided independently, drawing from their own locally informed points of view – can be more informative than the opinion of any individual participant.

After developing six themes of focus, refined through an iterative process, the Pharmacy Forecast Advisory Committee drafted 42 survey statements to interrogate key issues and concerns they believed would influence health-system pharmacy in the coming five years. The Committee nominated and selected 125 Forecast Panellists to complete the survey, individuals known to have expertise in health-system pharmacy, knowledge of trends and new developments in the field, and the ability to think analytically about the future.

Forecast panellists were asked to base their responses on their first-hand knowledge of current conditions in their region, not based on their understanding of national circumstances, providing a top-of-mind response regarding the likelihood of those conditions being very likely, somewhat likely, somewhat unlikely, or very unlikely to occur.

## 2022 FORECAST PANELLISTS

Responses were received from 96 FPs, a response rate of 77%. Representation was captured from across all Australian states and territories, with smaller jurisdictions slightly overrepresented proportionate to population share.



- **95%** of respondents had been **in practice for greater than ten years**; **49%** had been **in practice for greater than 20 years**.
- **61%** held the title of **Chief or Director of Pharmacy**, and the remaining **39%** held **senior titled positions**.
- **90%** indicated the **public sector** as their primary practice setting / organisation was in the, while **6%** indicated **private**.
- **60%** described a **metropolitan hospital** as their primary practice setting or organisation; **21%** indicated a **regional/rural hospital**; **16%** from **government, NFP departments or agency**; and **8%** from **academia**.
- Forecast Panellists reported their primary practice setting / organisations offered a diverse range of services, including **home health or infusion care (61%)**, **specialty pharmacy (78%)**, **in-patient care (88%)**, **ambulatory care (74%)**, **paediatric care (57%)**, and **hospice care (40%)**.



## THEME 1 – ENVIRONMENTAL SUSTAINABILITY

The following proportion of survey respondents assessed scenarios as **somewhat or very likely to occur by 2027** in their geographic region:

- 18% Hospital medical record systems would **incorporate information on environmental impact to guide choices** in pharmacological therapy.
- 50% All **pharmacy university degrees** will incorporate **carbon literacy and environmental sustainability** in their curriculums.
- 24% 100% of pharmacy departments will be **paper-free**.
- 54% All pharmaceutical contract tenders will include **meaningful and accountable environmental impact criteria**.
- 66% All pharmacy departments will have one or more **environmental sustainability champions**.
- 76% Hospitals will have **comprehensive pharmaceutical waste programs** in place.
- 61% Budget allocations will be increased for **new medication-related inventory and distribution technology solutions** to reduce wastage.

*“ The carbon footprint of Australia’s healthcare sector is estimated at over 7% of Australia’s total carbon emissions, with hospitals and pharmaceuticals the major contributors. Hospitals are responsible for 44% of these carbon emissions, followed by 19% from pharmaceuticals.*

### RECOMMENDATIONS

1. **Environmental impact should guide pharmaceutical choice**
2. **Environmental sustainability in pharmacy curriculum**
3. **Paper-free pharmacy departments**
4. **Consider environmental impact in pharmaceutical contracts**
5. **Support environmental sustainability champions**
6. **Comprehensive Pharmaceutical Waste programs**
7. **Harness wastage data**



Read full section in [Pharmacy Forecast Australia 2022 \(pg 8\)](#), including Partner Perspective from **Roland Sapsford**, CEO, Climate and Health Alliance.



## THEME 2 – FUTURE WORKFORCE

The following proportion of survey respondents assessed scenarios as **somewhat or very likely to occur by 2027** in their geographic region:

- 66%** Specialist pharmacy positions in the future will **require practice certification**.
- 37%** Increased visibility of pharmacy benefits would result in **legislated clinical pharmacy staffing ratios** being implemented.
- 69%** There will be a shift in direction of universities to develop curricula that **deliver graduates ready for immediate appointment** at the completion of undergraduate courses.
- 71%** Reforms to **nationally consistent pharmacy technician credentialing** will facilitate expanded roles
- 56%** Hospital pharmacists will increasingly participate in **non-traditional roles**, consequent to experience and expertise gained during the COVID-19 pandemic.
- 56%** Pharmacy leadership in 2027 would be **reflective of community diversity**.
- 74%** Data derived from newly deployed technology would likely enable a **more directed and flexible approach to work**.

“ Workforce issues are potentially exacerbated in a time of record high participation and low unemployment rates...

“ ...For hospital pharmacy, these pressures add to the traditional challenges of upskilling the workforce, the increasing demand for pharmacy services and the escalating cost and complexity of healthcare.

### RECOMMENDATIONS

1. Overcome barriers to pharmacist specialisation and unify Pharmacy Technician credentialing
2. Describe the Pharmacy Workforce to inform a national strategy
3. Build momentum for new graduate practice readiness
4. Advance technician roles in the profession
5. Set an example for versatility across the profession
6. Diversify pharmacy leadership demographics
7. Capture the benefits of big data for frontline clinicians



Read full section in [Pharmacy Forecast Australia 2022 \(pg 16\)](#), including Partner Perspective from **Verity Boustead**, President, National Australian Pharmacy Students' Association (NAPSA).



## THEME 3 – PATIENT CENTRED CARE

The following proportion of survey respondents assessed scenarios as **somewhat or very likely to occur by 2027** in their geographic region:

- 64%** Better availability of accurate patient information will lead to **efficiencies in medication reconciliation**.
- 76%** **New models of care are likely to be adopted** to provide clinical pharmacy services in the next five years.
- 58%** At least 10% of hospitals will incorporate **precision medicine**.
- 44%** Hospitals will have dedicated resourcing for a **deprescribing stewardship pharmacist**.
- 58%** All patients will receive a **patient-friendly medication list and management plan** on discharge.
- 57%** **Automated dispensing cabinets (ADCs) will be increasingly introduced** in Australian hospitals to reduce medication errors, safeguard medications from improper use, and improve efficiency of medication processes.

*“ Recent disruptive events have challenged the way clinical pharmacy services are delivered to patients...*

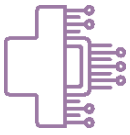
*“ ...unprecedented levels of innovation and adoption of technologies, the success of home-based and virtual care programs during the pandemic and the broadening of pharmacist roles to respond to COVID-19...*

### RECOMMENDATIONS

1. **Collaborate toward single-source patient information**
2. **Plan ahead for tech-led efficiency**
3. **Stay alert to emerging care models and funding opportunities**
4. **Publish and promote to help spread innovation**
5. **Start and build your local pharmacogenetics journey**
6. **Take the professional lead on pharmacogenetics**
7. **Amplify advocacy on deprescribing pharmacists**
8. **Lead collaboration toward patient friendly medication lists**
9. **Consider broad factors in the implementation of ADCs**



Read full section in [Pharmacy Forecast Australia 2022 \(pg 25\)](#), including Partner Perspective from **Dr Omar Khorshid**, President, Australian Medical Association (AMA)



## THEME 4 – TECHNOLOGY

The following proportion of survey respondents assessed scenarios as **somewhat or very likely to occur by 2027** in their geographic region:

- 5%** The **3D printing of pharmaceuticals** would assist national supply efforts through local, on demand printing of medications
- 90%** At least 5% of hospitals will be **subject to a data breach** within the next five years.
- 33%** Technologies like drones will be used to provide **medication delivery in ‘after hours’ scenarios**.
- 66%** Their health service would provide an **expanded virtual healthcare service** that included the upload of patient vital sign information.
- 87%** **Codified medication data** will be uploaded **into My Health Record**.
- 60%** More formalised training in a related technology field will become associated with **Specialist Informatics Pharmacist positions**.

“ In the Office of the Australian Information Commissioner Notifiable Data Breaches Report for January–June 2021, the healthcare sector was the most represented industry...

“ ...it is well known that serious medical errors occur due to miscommunication during the transition of care between primary and hospital healthcare providers...

### RECOMMENDATIONS

1. **Utilise technology to improve patient access to medicines**
2. **Explore technology to enable efficiencies, safe and secure medicine delivery**
3. **Focus on strengthening cybersecurity**
4. **Prepare to embrace more virtual care delivery and new data devices**
5. **Build a culture of codified data use**
6. **Build a workforce upskilled in technology**



Read full section in *Pharmacy Forecast Australia 2022* (pg 33), including Partner Perspective from **Vicki Ibrahim**, Program Director, Medicines Safety Program, Australian Digital Health Agency.





## THEME 5 – FUNDING MODELS

The following proportion of survey respondents assessed scenarios as **somewhat or very likely to occur by 2027** in their geographic region:

- 70%** Consistently applied, contemporary **five-year Pharmaceutical Reform Agreements (PRAs) will be in place across Australia.**
- 51%** **PBS subsidy of medicines** across all care settings **will be expanded.**
- 42%** The **funding model** for inpatient clinical pharmacy services in their region will be **linked to the SHPA Standards of Practice.**
- 71%** Remuneration for **PBS-funded chemotherapy** will have fallen **below the point at which it can be safely provided.**
- 51%** At least 5% of **patients will self-fund high-cost medicines** that are not subsidised for their medical condition on the PBS or by the hospital system
- 73%** Where deployed, **automated pharmacy and medication technologies will be used to inform annual budgets** based on accurate medication usage and transactional data.

“ *Pharmaceutical Reform Agreements enable access for public hospital patients to PBS medicines for outpatients, on discharge and for day treatment services...* ”

“ *... benefits of Pharmaceutical Reforms, which are ultimately describable in terms of medication safety and quality use of medicines...strong preference for agreements to be in place in all states and territories...* ”

“ *... likely that remuneration for PBS-funded chemotherapy will have fallen below the point at which [cancer services] can be safely provided...* ”

### RECOMMENDATIONS

1. **Complete national coverage of Pharmaceutical Reform Agreements**
2. **Embed PBS access into care model planning**
3. **Adopt pharmacist-to-bed ratios as per SHPA’s *Standard of Practice for Clinical Pharmacy Services***
4. **Work toward statewide formularies to ease inequity**



Read full section in [Pharmacy Forecast Australia 2022 \(pg 40\)](#)



## THEME 6 – WORKFORCE WELLBEING

The following proportion of survey respondents assessed scenarios as **somewhat or very likely to occur by 2027** in their geographic region:

- 88% All pharmacy staff will have the knowledge and safe working environment to **raise concerns about workplace stress, burnout and wellbeing**.
- 87% One in five pharmacy staff will **leave or substantially change their role**, within the hospital or even within the profession, **due to unresolved pressures** from the work environment.
- 77% There is a need for **structured training to support mental health** and wellbeing.
- 76% Staff mental health and wellbeing is a **WHS issue**.
- 76% Thought it somewhat likely or very likely priority is and will be placed on **building capacity in workplace wellbeing**.
- 59% **Wellbeing champions** have a positive impact on staff productivity, retention and self-efficacy.
- 69% Timely real time access to relevant data and decision tools would support time management by **aiding clinical prioritisation of precious resources** such as people and time.

“...one in five pharmacy staff will leave or substantially change their role (within the hospital or even within the profession) due to unresolved pressures from the work environment...”

“...increasing awareness and response to the challenges of supporting wellbeing in the pharmacist workforce...focus has been sharpened by the demands on pharmacists during the COVID-19 pandemic...”

### RECOMMENDATIONS

1. Normalise and embed deeper understanding of worker wellbeing
2. Build leadership skills around proactive wellbeing interventions
3. Foster culture of two-way workload and wellbeing management
4. Advocate for the importance of workplace wellbeing in achieving success
5. Focus training for individuals on wellbeing factors
6. Focus training for leaders on fostering a supportive culture
7. Identify staff mental health and wellbeing as a high risk in operational WHS plans
8. Appreciate individual stressors and wellbeing needs
9. Explore value (not just cost) of resourcing wellbeing initiatives
10. Research connection between electronic systems and staff wellbeing



Read full section in *Pharmacy Forecast Australia 2022* (pg 47), including Partner Perspective from **Kay Dunkley**, Executive Officer, Pharmacists' Support Services

# ABOUT SHPA

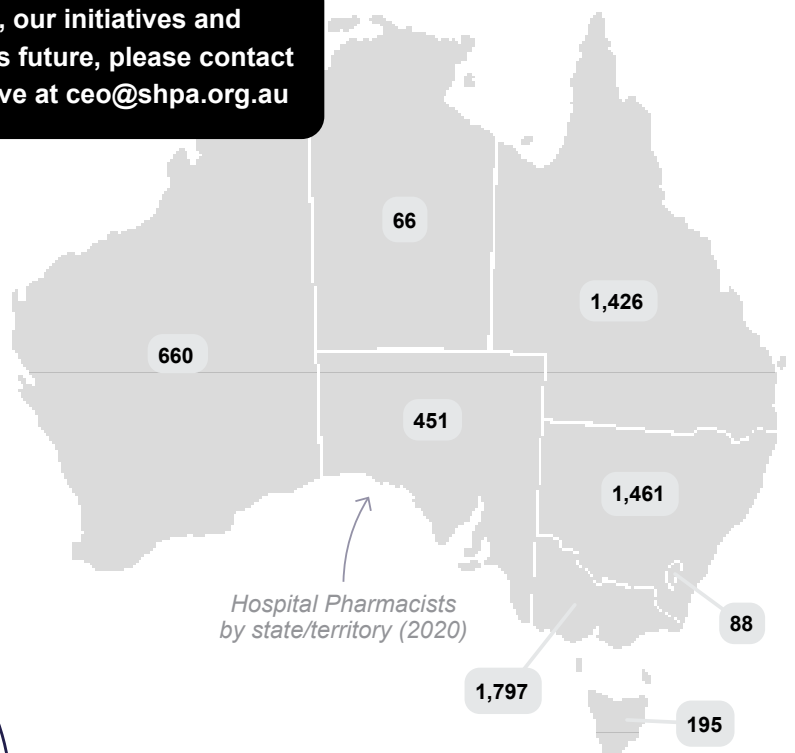
The Society of Hospital Pharmacists of Australia (SHPA) is the national, professional organisation for the 6,100+ Hospital Pharmacists, and their Hospital Pharmacist Intern and Hospital Pharmacy Technician colleagues working across Australia's health system, advocating for their pivotal role improving 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.



For more information on SHPA, our initiatives and our vision for a safer medicines future, please contact Kristin Michaels, Chief Executive at [ceo@shpa.org.au](mailto:ceo@shpa.org.au)

## HOSPITAL PHARMACY WORKFORCE AT A GLANCE



**Hospital Pharmacy is the fastest-growing pharmacy sector in Australia:**

2013	2020
4,000 Hospital Pharmacists	6,100+ Hospital Pharmacists
18% of all pharmacy jobs	23% of all pharmacy jobs

**82%** of Australian pharmacy students want jobs in Hospital Pharmacy.

**50%** of the Hospital Pharmacy workforce is aged 34 years or younger.

**75%** of the Hospital Pharmacy workforce is female.



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