

Pharmaceutical Reforms in SA Public Hospitals

The South Australian Government has accepted a Commonwealth offer to participate in a process of pharmaceutical reforms in public hospitals.

The reforms comprise a dual outcome:

- > Access to medicines via the Pharmaceutical Benefits Scheme (PBS) for:
 - > patients on discharge
 - > patients attending outpatient clinics
 - > a range of cancer chemotherapy drugs for day patients and outpatients.
- > Implementation of the Australian Pharmaceutical Advisory Council's (APAC) guiding principles to achieve continuity in medication management

Key Objectives

The key objectives of the reforms are to improve:

- > equity of access to medication for patients regardless of their place of care – public hospital, private hospital or community sector, and
- > safety and quality of medication management, including a smooth transition between hospital and community based care.

Previously, the government met the cost of all medicines supplied to public hospital patients. Under the reforms, hospital pharmacies will be able to claim reimbursement from Medicare Australia for PBS items supplied on hospital PBS prescriptions. The released funding will be used to improve safety and quality of medication management and continuity of care.

The reforms will be implemented in the major metropolitan public hospitals in a staged process beginning in the latter part of 2008.

South Australian implementation follows the successful uptake of the reforms interstate, commencing with Victoria in 2001, followed by Queensland, Western Australia, the Northern Territory and Tasmania.

Continuity of Care

Implementation of the APAC guiding principles will see hospital pharmacists more involved with medication management including review of medication at admission, throughout the episode of care and prior to discharge.

Patients will receive 30 days' supply of medication on discharge instead of 4-7 days as is current practice. This will allow them to make arrangements to visit their general practitioner and community pharmacy at a more convenient time after leaving hospital.

Hospital PBS

Hospital PBS prescriptions may be dispensed by community pharmacists, but hospitals are not permitted to dispense community PBS prescriptions.

Public hospital pharmacies will provide the same quantity of medication for the same cost as a community pharmacy. Medications for inpatients will continue to be provided without charge.

Hospital PBS Prescriptions

Prescribers employed by participating public hospitals will be able to write PBS prescriptions for all patients attending outpatient clinics, on discharge from hospital and when



Fact sheet for hospital pharmacy staff

receiving chemotherapy as same-day patients or as outpatients.

Hospital prescribers will only be prescribing medication that the patient requires an immediate supply of, not everything they are taking.

An approved hospital PBS prescription form must be used – it is different from community PBS prescription forms. To see an example of the hospital prescription, visit the pharmaceutical reforms page on the web site:

www.sahealth.sa.gov.au/pbs

Hospital prescription forms comprise three copies:

- > The top copy is for the patient or pharmacist and can be used as the attachment for repeat authorisations.
- > The second copy is to be sent to Medicare Australia with the claim.
- > The third copy is for filing in the patient's medical record at the hospital.

Hospitals will have their own pre-printed prescription forms that include hospital name and provider number.

Hospital pharmacy staff will need to become familiar with the PBS rules, in particular PBS quantities, and indications for authority and restricted items.

The PBS prescription must comply with Medicare Australia requirements, with information to include:

- > drug name, strength, form and dose
- > quantity
- > authority number if required
- > prescriber number and contact details (e.g. pager number)

The patient's name must be confirmed in the prescriber's own handwriting if a patient sticker is affixed to the form.

Up to ten items can be written on a hospital PBS prescription; including schedule 8 and non-PBS medicines.

Items requiring authority approval do not need to be written on a separate authority prescription form, but the approval number must be written in the column provided.

If an item is marked 'N' or 'No' under the supply column, this means the item is listed for information only and is not to be dispensed.

As previously, all items that patients have paid for at a hospital pharmacy, including non-PBS items, count towards the joint Commonwealth /State Safety Net.

Key Points for Hospital Pharmacy Staff

- > The reforms are being implemented to improve patient care.
- > Patients will receive appropriate quantities of medication on discharge.
- > There will be the same system for medication supply in hospital and the community.
- > There will be changes to work processes and new rules and regulations for dispensing and claiming PBS medicines.
- > Hospital pharmacy staff will need to become familiar with PBS rules, in particular for authority and restricted items.
- > Hospital pharmacists will contribute to enhanced patient outcomes through improving medication management.

For more information

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