

## Palliative Care Access to core Medicines (PCAM) Project – Pharmacies

Dear colleague,

The Pharmaceutical Society of Australia (PSA), Eastern Melbourne Primary Health Network (EMPHN), North Western Melbourne Primary Health Network (NWMPHN) and South Eastern Melbourne Primary Health Network (SEMPHN) would like to thank you for considering involvement with the Palliative Care Access to core Medicines (PCAM) Project.

If you choose to be involved, your pharmacy name, contact details and address will be published on a list of community pharmacies committed to stocking specific end-of-life medicines. The list will appear on consumer-facing and health care provider portals such the project landing page on the PSA's website, the PHNs' websites and HealthPathways Melbourne. This will enable General Practitioners, palliative care nurses and other health care professionals to refer palliative patients and their carers to community pharmacies who have committed to stocking the medicines on the recommended core medicines list (CML).

Attached, you will find an outline of the PCAM Project and a non-legally binding letter of intent to stock core palliative care medicines in your pharmacy. If you agree to stock these medicines, please complete an online version of the letter of intent by clicking [here](#). Alternatively, the letter of intent can be completed and returned to the project team via email (details listed below) at your earliest convenience.

Please do not hesitate to contact the PCAM Project team if you have any further questions. We look forward to your participation in this important initiative.

Kind regards,

Sam Flood

Project Pharmacist (PCAM Project)

[Sam.Flood@psa.org.au](mailto:Sam.Flood@psa.org.au)

Pharmaceutical Society of Australia

*We acknowledge the Traditional Custodians of the land on which our work in the community takes place and their connections to land, sea and community. We pay our respect to their Elders past and present and extend that respect to all Aboriginal and Torres Strait Islander peoples today.*

# Letter of Intent for the provision of the Palliative Care Access to core Medicines (PCAM) Project – Pharmacies

## Background

Most people say that, if they had a terminal illness, they would prefer to be cared for at home and to die there if possible.<sup>1</sup> The Palliative Care Access to Core Medicines (PCAM) project was initially funded by the North Western Melbourne Primary Health Network (NWMPHN) with the aim of supporting palliative care in the community. This project aims to support palliative care in the community and assist people who wish to die at home through timely access to essential medicines. This minimises suffering associated with emergent end-of-life symptoms.

The Pharmaceutical Society of Australia (PSA) was first commissioned by NWMPHN to coordinate this project in 2021. The project has now expanded to include the South Eastern Melbourne Primary Health Network (SEMPHN) and the Eastern Melbourne Primary Health Network (EMPHN). In this phase, PSA will engage with pharmacies in all three PHNs (EMPHN, NWMPHN and SEMPHN). We invite all community pharmacies within the region to participate in this initiative.

The PCAM Project uses a Core Medicines List (CML) that was established through consultation with local palliative care providers, including local GPs and pharmacists, working in NWMPHN's region in 2021. For the expansion of the project, SEMPHN and EMPHN are using the same list to maintain consistency within the metropolitan Melbourne region.

**Table 1:** Core Medicines List for Community Patients in EMPHN, NWMPHN and SEMPHN's regions

Medicine Category	First Line Medicines	Minimum Quantity to stock	Indication/(s) for use in terminal phase patients
<b>Anxiolytic</b>	Clonazepam 2.5mg/mL (0.1mg/drop) Oral Liquid	10mL bottle	Agitation associated with delirium Anxiety associated with dyspnoea
	Midazolam 5mg/mL Injection (If an injection is required or preferred)	5 or 10 ampoules	
<b>Antipsychotic</b>	Haloperidol 5mg/mL Injection	10 ampoules	Agitation Nausea, vomiting
<b>Anticholinergic</b>	Hyoscine butylbromide 20mg/mL Injection	5 ampoules	Respiratory tract secretions Noisy breathing
<b>Antiemetic</b>	Metoclopramide 10mg/2mL Injection	10 ampoules	Nausea, vomiting
<b>Analgesic (High potency opioid)</b>	Morphine (sulfate or hydrochloride) 10mg/mL and/or 30mg/mL Injection	5 ampoules	Dyspnoea Pain

<sup>1</sup> Palliative Care Australia. *Supporting palliative care patients who choose to die at home*. Available from: <https://palliativecare.org.au/palliative-matters/supporting-palliative-care-patients-who-choose-to-die-at-home> [Accessed 6 November 2020]

The CML (Table 1) addresses the main symptoms commonly seen during terminal phase (pain, delirium, nausea, dyspnoea, and noisy breathing). The CML also considers affordability and accessibility, by considering the need for parenteral administration and availability through the Pharmaceutical Benefits Scheme (PBS).

Community pharmacies are encouraged to stock these first-line medicines as this is the recommended list that will be communicated in the region. Additional medicines to the list may be stocked dependent upon local prescribing preferences and/or stock availability.

**Note (8 November 2023):**

We are aware of some supply issues with metoclopramide injection, including the discontinuation of the PBS-listed Maxolon injection. Alternative brands of metoclopramide have not yet been listed on the PBS. However, as their cost is not prohibitively expensive, our recommendation to prescribers is to continue to prescribe metoclopramide as first line antiemetic medicine. Haloperidol injection (PBS-listed) is also an appropriate alternative therapy for nausea and vomiting in palliative care while these supply issues continue, however it is more sedating.

This list does not restrict which medicines can be prescribed for individual palliative patients as some medicines may not be appropriate in certain circumstances (i.e. metoclopramide/haloperidol is best avoided in Parkinson's Disease). However, it is one approach which will allow community pharmacies to anticipate medicines most likely to be prescribed allowing prescribers to anticipate medicines most likely to be available for rapid supply in community pharmacies and residential aged care facilities within the metropolitan Melbourne region. We recommend discussing any questions with your local specialist Community Palliative Care service provider.

The stocking of medicines from the list, together with improved collaboration between health care providers, can facilitate timely prescription, dispensing and, ultimately, administration of medicines for end-of-life symptom management. This results in improvement in symptom control and quality of life of patients.

PSA will be contacting community pharmacies to create awareness about this project and the CML.

You may find more information about the project and supporting resources at the [PSA website](#).

## Aims of the PCAM Project

1. Increase awareness and use of the CML with prescribers, community palliative care providers and community pharmacists.
2. Increase the number of community pharmacies stocking all medicines in the CML
3. Increase awareness of anticipatory prescribing
4. Increase collaboration between general practitioners and community pharmacists for end-of-life care.
5. Improve timely access to palliative care medicines for patients.

## The Pharmaceutical Society of Australia's Responsibilities

PSA is responsible for the overall delivery of the project and will:

- Contact community pharmacies in EMPHN, NWMPHN and SEMPHN's region about the CML, and encourage pharmacists to stock the CML
- Maintain an online hub of palliative care resources relevant to pharmacists and prescribers.
- Develop an online mapping resource that shows the locations of pharmacies that have agreed to stock the CML within EMPHN, NWMPHN and SEMPHN's regions

## Community Pharmacy's Responsibilities

To enable the PCAM Project to achieve its intended outcomes, community pharmacies will be expected to:

- Discuss with local prescribers including GPs, nurse practitioners and palliative care networks that they are stocking the CML, and any additional medicines according to local preferences.
- Commit to stocking at least one medicine from each of the five medicine categories on the CML.
- Conduct regular stock audits of core palliative care medicines including expiry date checks.
- Maintain minimum stock levels of core palliative care medicines.

## Legal Effect

- This letter of intent is not a legally-binding document.

## Funding and Financial Risk

- Pharmacies will need to commit to stocking the CML for patients in EMPHN, NWMPHN and SEMPHN's region. Financial risk to pharmacies is likely to be mitigated through promotion of consistent prescribing of medicines on the core list and supporting more patients to be cared for and die at home.

## Palliative Care Access to core Medicines (PCAM) Project – Letter of Intent

You can complete the Letter of Intent online by clicking on the weblink below/copying the weblink into your web browser, or by filling out this form and returning it via email.

<https://forms.office.com/r/QmAUdPPf4R>

### Community Pharmacy's details

Primary Contact Name and Position	
Pharmacy Name	
Pharmacy Street Address	
Pharmacy Suburb, State, Postcode	
Pharmacy Contact Number	
Pharmacy Fax Number	
Email Address	
Hours of Operation	

### Optional (tick if agree)

- Commit to keeping a regular supply of at least one medicine from each of the five medicine categories on the CML
- Agree to having the pharmacy's contact details and hours of operation listed on the online map, EMPHN's website, NWMPHN's website, SEMPHN's website and palliative care pathways in Health Pathways Melbourne to indicate commitment to stocking these medicines.

By signing this letter of intent, the parties confirm that the information contained within this letter of intent is complete and correct.

### Pharmaceutical Society of Australia

\_\_\_\_\_  
Name

\_\_\_\_\_  
Position

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

### Community Pharmacy

\_\_\_\_\_  
Name of authorised representative

\_\_\_\_\_  
Position of authorised representative

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**Once complete, please return via email to:**

*Email:* [Sam.Flood@psa.org.au](mailto:Sam.Flood@psa.org.au)