



PSA 2025-2026 **TASMANIAN BUDGET SUBMISSION**

20 December 2024

The Hon Guy Barnett MP
Treasurer
Level 10, Executive Building
15 Murray Street
Hobart TAS 7000

Dear Treasurer,

The Pharmaceutical Society of Australia (PSA) welcomes the opportunity to provide a submission for the 2025-26 Tasmanian State Budget Community Consultation process.

As medicine safety experts and one of our most accessible frontline health workforces, pharmacists can play a greater role in improving access to medicines and health care to enable better health outcomes for all Tasmanians.

Regional Tasmania continues to face significant GP workforce shortages, with many areas struggling to recruit and retain GPs, resulting in excessive wait times with patients reporting waiting lists of 4-6 weeks in some areas.

With workloads already at breaking point, this crisis requires urgent action to ensure that the people of Tasmania have access to timely, high quality and comprehensive care regardless of where they live.

PSA has identified three key budget proposals for the Tasmanian Government's consideration that would directly improve patient care:

- **Fund pharmacists to undertake training to deliver expanded healthcare services to their communities.**
- **Expand the scope of pharmacist practice and trial collaborative models of care in aged care and rural areas.**
- **Reduce unnecessary emergency department presentations by funding community pharmacy consultations for patients with non-urgent conditions.**

These measures will help strengthen health care in Tasmania, allowing pharmacists to do more to support the health system while it is under immense pressure. PSA is committed to working with the Government to improve the health and wellbeing of all Tasmanians.

Sincerely,



Mark Kirschbaum FPS
Tasmanian President

About PSA

PSA is the peak national professional pharmacy organisation representing all of Australia's 39,000 pharmacists working in all sectors and across all locations.

PSA is committed to supporting pharmacists in helping Australians to access quality, safe, equitable, efficient and effective health care. PSA believes the expertise of pharmacists can be better utilised to address the healthcare needs of all Australians.

PSA works to identify, unlock and advance opportunities for pharmacists to realise their full potential, to be appropriately recognised and fairly remunerated.

PSA has a strong and engaged membership base that provides high-quality health care and are the custodians for safe and effective medicine use for the Australian community.

PSA leads and supports innovative and evidence-based healthcare service delivery by pharmacists. PSA provides high-quality practitioner development and practice support to pharmacists and is the custodian of the professional practice standards and guidelines to ensure quality and integrity in the practice of pharmacy.

In Tasmania, there are approximately 900 registered pharmacists working in community pharmacies, hospitals, general practices, aged care facilities, disability care organisations, Aboriginal Community Controlled Health Organisations, primary health networks, government departments and agencies, and within other private sector organisations.

The average Australian visits a pharmacy 18 times each year.^a Each of these interactions with a pharmacist is an opportunity to impart a health message, deliver primary health care, and improve the health of the Tasmanian community. To achieve this, pharmacists need support, including remuneration, allowing them to fulfil their full scope as primary healthcare providers and medicine experts.^b

^a National Australia Bank. NAB Australian Pharmacy Survey 2021. At: <https://business.nab.com.au/nab-australian-pharmacy-survey-2021-48091/>

^b Pharmaceutical Society of Australia. Contemporary Community Pharmacy Practice: White Paper. Community of Specialty Interest. Jun 2022. At: <https://my.psa.org.au/s/article/CSI-CCPP-white-paper>

RECOMMENDATION 1

Fund pharmacists to undertake training to deliver expanded healthcare services to their communities.

The challenge

The Tasmanian healthcare system is under significant pressure, with access to primary care becoming increasingly difficult. Currently, 23% of people report delaying GP visits due to unavailability of appointments or long wait times. By 2032, patient demand for GPs is expected to increase by a third,^c and Tasmania is predicted to face a shortfall of over 180 GPs by 2028.^d

In September 2023, the Minister of Health announced an expansion of Tasmanian pharmacists' scope of practice to implement all recommendations arising from the Pharmacist Scope of Practice Review Final Report.^e However, the required training for pharmacists to deliver these broader services could be a barrier to implementation due to its cost and duration, averaging 12 to 18 months to complete.

The proposed approach

Funding pharmacists to complete the necessary training will accelerate the implementation of a wider range of healthcare services in community pharmacies. It will equip and expand the pharmacist workforce to address both existing and emerging health challenges. Funding could be provided through a cost-share arrangement with pharmacists.

Why it will work

Consumers have a high degree of trust in pharmacists, with nine in ten supporting a greater prescribing role for them. There is also strong consumer confidence in pharmacists' ability to provide a broader range of treatments for acute conditions, and to manage chronic conditions effectively.^f

Pharmacists have demonstrated their ability to adapt to the increasingly complex health needs of Australians, the aging population and overstretched health system. By expanding their role as acute health hubs within communities, trained pharmacists will provide greater access to health services across Tasmania, alleviating pressure on emergency departments and GPs.

Budget implications

PSA estimates that \$2.45 million will be required to upskill around 350 Tasmanian pharmacists to deliver an expanded range of services.

Benefits to Tasmania

- Greater access to healthcare services, in a timely manner.
 - Equitable access to care in community pharmacies across Tasmania.
 - Reduced pressure on emergency departments and GPs.
-

^c Pharmaceutical Society of Australia. Pharmacists in 2030. PSA Canberra: PSA; 2024. At: www.psa.org.au/3d-flip-book/pharmacists-in-2030/

^d Australian Government Department of Health and Aged Care. Supply and Demand Study, General Practitioners in Australia. August 2024. At: <https://hwd.health.gov.au/resources/primary/gp-supply-and-demand-study-compendium-august-2024.pdf>

^e KPMG. Pharmacist Scope of Practice Review – Final Report. KPMG; July 2023. At: https://www.health.tas.gov.au/sites/default/files/2023-09/pharmacist_scope_of_practice_review_-_final_report.pdf

^f Pharmaceutical Society of Australia. Pharmacists in 2030. op. cit.

RECOMMENDATION 2

Expand the scope of pharmacist practice and trial collaborative models of care in aged care and rural areas.

The challenge

Medicine-related problems are a significant burden on our health system. It is estimated that each year, over 5,000 Tasmanians are admitted to hospital because of problems with their medicines, and a further 10,000 Tasmanians present to emergency departments. These admissions cost the Tasmanian health system \$35 million per annum, not including emergency department costs.^g

Many of these problems arise in aged care environments, with 98% of residents in aged-care facilities having had at least one medicine-related problem, and one in five unplanned hospital admissions of residents living in aged-care facilities being due to inappropriate medicine use.^h

The proposed approach

PSA recommends the Tasmanian government pilot the nation-leading models of care announced by the then Minister for Health, Guy Barnett, in September 2023.ⁱ PSA agrees with the Minister that having pharmacists working collaboratively with GPs and prescribing with the safeguards of a treatment plan approved by the GP will significantly improve patient care. We agree these initiatives will improve access to health care for Tasmanians living in remote areas and those with limited access to a GP, and those living in residential aged care facilities. We look forward to supporting the Rockliff Liberal Government deliver the healthcare services regional Tasmanians need and deliver on their long-term health plan.

Why it will work

The collaborative involvement of pharmacists in prescribing, monitoring, and adjusting medications leads to improved patient care and outcomes from combined expertise of healthcare professionals. Pharmacist-prescribed medications, including dose titration and de-prescribing, can optimise medication regimens and minimise the risk of adverse drug events. Integrating pharmacists as prescribers within multidisciplinary teams can expand patients' access to healthcare services.

Pharmacists have demonstrated their ability to provide timely medication assessments and adjustments, reducing the burden on other healthcare providers and improving the overall efficiency of care delivery.

Budget implications

PSA estimates the development of the collaborative prescribing framework for residential care facilities, models of care, supporting resources and implementation of a pilot across aged care sites would cost approximately \$2 million.

PSA estimates the development of the 'hub and spoke' model for collaborative multidisciplinary prescribing within a virtual team and a pilot of this model in key rural, regional and under serviced sites across the state would cost \$2 million.

^g Medicine Safety: Take Care report, Pharmaceutical Society of Australia 2019. Available at: <https://www.psa.org.au/wp-content/uploads/2019/01/PSA-Medicine-Safety-Report.pdf>

^h Medicine Safety: Aged Care report, Pharmaceutical Society of Australia 2020. Available at: <https://www.psa.org.au/wp-content/uploads/2020/02/Medicine-Safety-Aged-Care-WEB-RES1.pdf>

ⁱ Tasmanian Government Media Release (Nation-leading health initiative to benefit aged care residents); September 2023. Available at: https://www.guybarnett.com.au/files/3116/9518/7726/2023_09_14_Nation-leading_health_initiative_to_benefit_aged_care_residents.pdf

^j Tasmanian Government Media Release (Delivering nation-leading health approach to Tasmanians in remote areas); September 2023. Available at: https://www.guybarnett.com.au/files/3116/9518/7726/2023_09_14_Nation-leading_health_initiative_to_benefit_aged_care_residents.pdf

Additional consideration would need to be given to the cost of medicines prescribed by pharmacists, which would be estimated to cost \$1 million per trial (in the absence of pharmacist-prescribed medications attracting a PBS subsidy).

Benefits to Tasmania

- Improved access to care for Tasmanians living in rural and remote or under serviced communities.
 - Enhanced medication management through collaborative multidisciplinary prescribing.
 - Reduction in the use of psychotropic medicines/chemical restraints, improving the quality of life for Tasmanians living in Residential Aged Care Facilities.
 - Reduction in unplanned hospitalisations from medicine-related adverse events.
-

RECOMMENDATION 3

Reduce unnecessary emergency department presentations by funding community pharmacy consultations for patients with non-urgent conditions.

The challenge

Pharmacists are underutilised in HealthDirect triage pathways being used in Tasmania to reduce emergency department (ED) presentations.

From July to September 2024 there were approximately 6,500 ED presentations in Tasmania triaged as either category 4 (e.g. sprained ankle, earache) or category 5 (e.g. small cuts or abrasions).^k Treating minor illnesses in hospital EDs is an inefficient use of resources, putting unnecessary pressure on the broader healthcare system.

The proposed approach

PSA recommends the Tasmanian Government fund 100 pharmacies to provide a minor illness consultation service. The participating pharmacies would be selected based on specific criteria that would take into consideration the pharmacy's location, opening hours, proximity to a hospital, availability of local GP appointments, and capacity to provide the services.

Pharmacists would treat those with symptoms consistent with minor illness, including headaches and migraines, body aches and pains, insect bites, rashes and minor wounds.

Why it will work

There is strong evidence that patients seeking care from community pharmacists for minor illnesses have the same health outcomes as those seeking care in a general practice or emergency department.^l

Community pharmacists remain among the most accessible health professionals in Tasmania and utilising them to triage, manage and refer lower urgency presentations that are already within their scope of practice would optimise access to the right level of care, at the right cost and in a timely manner. It would relieve pressure on existing ED services and create greater capacity to respond to more urgent conditions.

Consumers trust pharmacists, and support enabling them to do more to support their health and well-being, particularly in relation to tasks such as treating minor ailments.^m This would ensure equitable access to treatment for people unable to access a GP, and where the alternative is to attend the ED.

Budget implications

PSA estimates that a 12-month pilot program of 100 participating community pharmacies, providing a total of 50,000 funded consultations would cost \$1.8 million.

This represents up to \$32.95 million in budget efficiencies.ⁿ

^k Tasmanian Department of Health, Health System Dashboard. Available at: <https://www.health.tas.gov.au/health-system-dashboard/monthly/emergency-department#presentations>

^l Aly M, Garcia-Cardenas V, Williams K et al. A review of international pharmacy-based minor ailment services and proposed service design model. *Res Social Adm Pharm* 2018; 14(11):989–98.

^m Pharmaceutical Society of Australia. Pharmacists in 2030. op. cit.

ⁿ National Hospital Cost Data Collection, Round 24. Available at: https://www.ihacpa.gov.au/sites/default/files/2022-08/NHDC%20Round%2024%20infographic_0_0.pdf

Benefits to Tasmania

- Greater choice for patients to seek the right level of care in a timely manner.
 - Reduced pressure on existing emergency departments.
 - Reduced state government expenditure on non-urgent care presentations.
-