



The Deadly pharmacists modules

Foundation training for pharmacists working with Aboriginal and Torres Strait Islander people, communities and primary health care services

Are you ready to be Deadly?

In Aboriginal English the word 'deadly' means fantastic, great or awesome.¹

What are the *Deadly pharmacists* modules?

The *Deadly pharmacists* modules, developed by the Pharmaceutical Society of Australia (PSA) in co-design with the National Aboriginal Community Controlled Health Organisation (NACCHO), represent a culturally responsive education initiative for pharmacists practising in Australia.

Following the success of the *IPAC Project*, the *Deadly pharmacists* modules were originally released as a seven-module course in 2022 with the aim of equipping pharmacists with the skills needed to work with Aboriginal and Torres Strait Islander primary health care services. Over time, extraordinary uptake by more than 5,300 individuals has demonstrated the program's applicability to a much wider network of pharmacists.

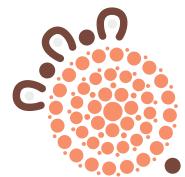
These modules play a vital role in embedding cultural safety and responsiveness in Australian pharmacy practice, aligning with national health priorities and pharmacist competency standards.

What's changed?

In 2025, PSA and NACCHO collaborated to make minor updates and reaccredit the *Deadly pharmacists* modules. The changes ensure that content reflects best practice, contemporary resources are highlighted, and the learner experience is optimised.

The *Deadly pharmacists* modules are now available as seven individual CPD-accredited modules, each of 1-hour duration.

Pharmacists, interns and pharmacy students can now choose which of the seven modules to enrol in, with a Certificate of Completion available for each module upon successful completion of its associated assessment activity.



Why should I enrol in the Deadly pharmacists modules?

The *Deadly pharmacists* modules will help you develop the skills you need to work in a culturally safe and responsive way with Aboriginal and Torres Strait Islander people and primary health care services. They cover topics such as Aboriginal and Torres Strait Islander culture, communication skills including how to use clinical yarning in your practice, and conditions of prevalence in some Aboriginal and Torres Strait Islander communities.

They also cover practical information such as how Aboriginal and Torres Strait Islander primary health services are funded, and important MBS and PBS information pharmacists need to understand when caring for Aboriginal and Torres Strait Islander people. The modules include interviews with pharmacists who work within Aboriginal and Torres Strait Islander primary health care services, who share their passion and knowledge for working in this very rewarding environment.

The Deadly pharmacists modules were produced on Tubbagah Wiradjuri, Nyangbul Budjalung, Ngarkat, Gubbi Gubbi, Wathaurong, Boon Wurrung, Ngunnawal and Whadjuk Noongar Countries.

Deadly pharmacists: People – cultures and histories

Learning objectives

- 1. Describe the effects of past government policy on the health of Aboriginal and Torres Strait Islander peoples
- 2. Describe the Aboriginal and Torres Strait Islander defined measures of health and wellbeing
- 3. Discuss how local Aboriginal and Torres Strait culture affects how healthcare is delivered
- 4. Define culturally safe healthcare

Key topic areas

- An introduction to Aboriginal and Torres Strait Islander cultures and histories
- Cultural practices
- · Health, healing and history
- Providing culturally safe care for Aboriginal and Torres Strait Islander peoples

Deadly pharmacists: Communication

Learning objectives

- 1. Discuss how local culture affects communication
- 2. Explain clinical yarning and how it can be used as a communication tool
- Describe ways to build relationships with other members of the Aboriginal Community Controlled Health Organisation (ACCHO) team.
- 4. Identify ways a pharmacist can improve staff knowledge about medicines within an ACCHO.

Key topic areas

- · Communicating with patients and clinical yarning
- Developing relationships and communicating with other members of the ACCHO
- · Providing education to the ACCHO team

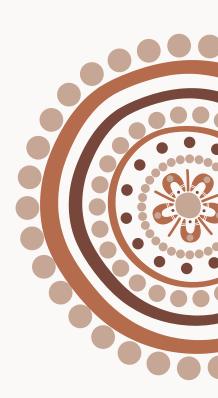
Deadly pharmacists: Clinical conditions

Learning objectives

- Discuss how local epidemiology affects health service delivery
- 2. Discuss health conditions of prevalence in some Aboriginal and Torres Strait Islander populations
- Identify resources available for health conditions of prevalence in some Aboriginal and Torres Strait Islander populations

Key topic areas

- · Leading specific causes of total burden
- · Local epidemiology
- Conditions of prevalence
- · Skin conditions and infections
- · Respiratory conditions
- Substance use disorders
- Mental health
- Sexual health
- · Eye and ear conditions



Deadly pharmacists: Programs for medicines access and medicine management principles

Learning objectives

- Identify government-funded medicines access programs for Aboriginal and Torres Strait Islander peoples
- 2. Discuss the issues in medicines storage and supply from ACCHOs in remote and non-remote areas
- Describe medication management principles including formulary policies, ordering and storing medicines
- 4. Discuss how ACCHO policies must align with state and federal legislation on medicines

Key topic areas

- Government-funded medicines access programs
- · Medicine management principles for ACCHOs

Deadly pharmacists: Clinical care

Learning objectives

- Describe ways to tailor your approach for conducting medication reconciliation when working with Aboriginal and Torres Strait Islander people.
- 2. Describe the processes involved to conduct a thorough review of a person's medicines.
- 3. Discuss how pharmacists' knowledge and skills can be adapted for local health needs.

Key topic areas

- Medication reconciliation and comprehensive medication management reviews
- Social determinants that can affect medication management



Deadly pharmacists: Models of care -Aboriginal and Torres Strait Islander primary health care services

Learning objectives

- Describe the different Aboriginal and Torres Strait Islander primary health care service models and governance structures
- Define the roles of people who work in an Aboriginal and Torres Strait Islander primary health care service
- 3. Describe the pharmacist's role in an Aboriginal and Torres Strait Islander primary health care service

Key topic areas

- How do Aboriginal and Torres Strait Islander primary health care services work?
- Who works in an Aboriginal and Torres Strait Islander primary health care service?
- The pharmacist's role in an Aboriginal and Torres Strait Islander primary health care service

Deadly pharmacists: The Medicare Benefits Schedule, clinical information systems & clinical governance

Learning objectives

- Discuss Medicare Benefits Schedule items relevant to pharmacists working in Aboriginal Community Controlled Health Organisations and the Practice Incentives Program
- 2. Describe clinical information systems used within Aboriginal Community Controlled Health Organisations including how to document in the patient record
- 3. Describe how pharmacists can help Aboriginal Community Controlled Health Organisations meet accreditation standards
- Summarise quality improvement activities pharmacists can undertake in an Aboriginal Community Controlled Health Organisation

Key topic areas

- · Medicare funding and the practice
- · Clinical information systems
- · My Health Record
- · Clinical governance and accreditation



Is there a cost for the *Deadly* pharmacists modules?

Development of the original course in 2022 was supported by the Australian Government Department of Health under the Indigenous Australians Health Program. This enabled PSA to offer the modules free of charge to all enrolees for an initial period of 3 years.

From September 2025, the updated modules will remain free of charge for PSA members* as a member benefit, while a non-member fee of \$60 per module will apply.

* PSA offers complimentary membership to pharmacy students across Australia. To become a member, click **here**.

Questions?

For queries, including advice for non-member pharmacists undertaking the *Deadly pharmacists* modules as a requirement under PSA's Pharmacist Prescribing Scope of Practice Training Program (or similar paid program), please contact learnersupport@psa.org.au

Artwork created by Lani Balzan for the Deadly pharmacists modules. Lani Balzan is a proud Aboriginal woman from the Wiradjuri people of the three-river tribe. Her family originates from Mudgee but she grew up all over Australia and lived in many different towns. She now calls the Illawarra home.

The artwork centrepiece represents the Aboriginal and Torres Strait Islander person, receiving care from the pharmacists, learning about the need to have connected, joined up care, through this training platform, which is culturally appropriate to Aboriginal and Torres Strait Islander people.

Reference

 Rogers C. Respectful Terminology | Indigenous Awareness | Evolve Communities [Internet]. Evolve Communities Pty Ltd. 2018 [cited 2025 Aug 11]. Available from: https://www.evolves.com.au/respectful-terminology/

How do I access the *Deadly Pharmacists* modules?

To enrol, click on the module title below or scan the QR code.



Deadly pharmacists:People - cultures and histories



Deadly pharmacists:Communication



Deadly pharmacists: Clinical conditions



 Deadly pharmacists:
Programs for medicines access and medicines management principles



Deadly pharmacists:Clinical care



Deadly pharmacists:
Models of care - The Aboriginal and Torres
Strait Islander primary health care service



Deadly pharmacists:
The Medicare Benefits Schedule, clinical information systems & clinical governance

