

## Pharmacy agreement updated but not upgraded

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Australian patients and taxpayers will contribute more than \$25 billion over five years under the new Community Pharmacy Agreement yet consumers have little effective say in this central part of the health system.

The Consumers Health Forum is disappointed that the new Seventh Community Pharmacy Agreement between the Federal Government and pharmacy owners has failed to give more weight to proposals for greater input from consumers and more transparency and deregulation to better meet community interests, the CEO, Leanne Wells, said.

The Agreement was announced on 12 June and made public on 19 June.

“Pharmacies are the most common point of contact between consumers and the health system, yet the Government and the Pharmacy Guild have declined to accept a place for the consumers at negotiations for the agreement.

“For the first time, the Agreement includes the Pharmaceutical Society of Australia as a signatory which is welcome broadening of input. The new agreement does include provision for the government to involve CHF in consultations, but this is well short of the ideal we sought.

“CHF has recommended reforms to place pharmacy on a more consumer-responsive basis including clearer information on medicine pricing and services offered as well as separating payments for professional services from the rest of the agreement.

“The response to these proposals has been minimal.

“Despite the repeated recommendations of Government inquiries and reviews, there has been no real governance reform. As a result there is

Contact: Mark Metherell, 0429 111 986

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little in this agreement --- despite its central role in transactions with consumers --- that would support contemporary realities of consumer expectations and technological change.

“One enhancement to the agreement has been the introduction of a Closing the Gap initiative. This includes a commitment to work with NACCHO and to have an Aboriginal and Torres Strait Islander person chair the Pharmacy Consultation Committee when there is discussion of Aboriginal and Torres Strait Islander specific measures.

“CHF had also sought more rigorous and improved arrangements for the provision of medication management for residents in aged care, whether in institutions or at home. The agreement supports improvement and to follow the recommendations by the Royal Commission into Aged Care Quality and Safety.

“Another area of concern has been the lack of provision in many cases of readily available information about prescribed medicine for patients. The agreement states that community pharmacists be encouraged to provide consumer medicine information. On the face of it this is hardly an adequate requirement given that the dispensing fee is remuneration in part for the provision of medicines advice.

“The Agreement should be consumer-centred, putting the delivery of appropriate and affordable medicines to consumers at the heart of what it does.

“Community pharmacy is an integral part of the quality use of medicines and its place in ensuring medicine safety as well as access should be recognised and built upon.

“It should ensure community pharmacy and pharmacists are integrated into the primary health care system,” Ms Wells said.

**See CHF’s [Report Card](#) on the Seventh Community Pharmacy Agreement.**

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