THE IMPLEMENTATION OF PORTFOLIO COMMITTEE NO. 2 RECOMMENDATIONS RELATING TO CROSS-JURISDICTIONAL HEALTH REFORM AND GOVERNMENT CONSULTATION WITH REMOTE, RURAL AND REGIONAL COMMUNITIES

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To whom it may concern

Inquiry Submission: Implementation of Portfolio Committee No. 2 Recommendations on Cross-Jurisdictional Health Reform

Background and Purpose

This submission addresses the Terms of Reference outlined for the Select Committee on Remote, Rural, and Regional Health, focusing on the progress and issues related to implementing Portfolio Committee No. 2 recommendations. It highlights practical steps to enhance health outcomes and access to services in remote, rural, and regional areas of New South Wales (NSW), drawing on the experiences of two family-owned community pharmacies in Gunnedah and Narrabri.

Operating in these rural towns, we have developed strong relationships with local GPs and healthcare providers, which have informed our understanding of the urgent need for innovative solutions to meet the health needs of our communities. The ongoing reduction in GP availability has further highlighted the critical role of pharmacies in bridging gaps in healthcare delivery. As pharmacists, we are ready to take on expanded responsibilities to better serve our patients. We have already implemented prescribing services for urinary tract infections (UTIs) and certain dermatological conditions, as well as the continued supply of oral contraceptives. These initiatives have been warmly embraced by our community, highlighting the demand for accessible, pharmacist-led healthcare solutions.

Key Areas of Focus

1. Cross-Jurisdictional Cooperation

• Long-term Strategic Planning (Recommendations 1, 7, 8, and 11) Collaborative efforts between the NSW and Australian governments are essential for developing strategic plans to improve health services in rural areas. This planning should prioritise primary health care initiatives that address the unique challenges faced by remote populations, such as workforce shortages and logistical barriers to care. Encouraging students to come to rural practice encourages these people to continue practicing in rural areas.

2. Collaboration Between NSW Health and Australian Government Bodies

Joint Initiatives and Training Programs (Recommendations 9, 10, 14, 21, 22, and 39)

Enhanced collaboration is vital for delivering targeted health initiatives and training programs. By sharing resources and expertise, healthcare professionals, including pharmacists, can be better equipped to meet the specific needs of rural communities.

3. NSW Government Consultation with Health Stakeholders

• Improving Communication (Recommendations 5, 42) Establishing effective communication channels between communities and health services is crucial for understanding local health needs. This can facilitate better engagement and ensure that health services are responsive to community feedback.

• **Developing Place-Based Health Plans** (*Recommendation 43*) Implementing place-based health plans that reflect the unique characteristics of each community can lead to more effective health service delivery and improved outcomes.

4. Prioritising the Health of Regional Communities

• **Government Decision-Making** (*Recommendations 36, 37, and 44*) The NSW Government must prioritise regional health in its decision-making processes, ensuring policies and funding reflect the specific needs of rural communities. This includes addressing workforce shortages and improving health service accessibility.

Contributions of Rural Pharmacies

Our pharmacies in Gunnedah and Narrabri are deeply embedded in the local healthcare landscape, providing services that enhance health outcomes in remote and regional areas. Key contributions include:

- **Vaccination Services**: Increasing immunisation rates by providing accessible vaccination services, which reduce the prevalence of vaccine-preventable diseases.
- Home Medicines Reviews (HMRs): Ensuring patients, especially the elderly and those with chronic conditions, use their medications safely and effectively.
- **Quality Use of Medicines (QUM) Services**: Supporting nursing homes and care facilities with medication safety and efficacy services. We travel to Quirindi, Boggabri, Walgett, Brewarrina, Collarenebri and Lightning Ridge but do not have any funding available for travel.
- **Transitions of Care**: Assisting patients moving between different health settings to improve continuity and reduce hospital readmissions. We are collaborating with hospitals, GPS, nurses and aged care facilities however there is no formal system and we rely on faxes, discharge papers and numerous phone calls to ensure the correct medication is being given.

Real-World Challenges

The following challenges are particularly pertinent to rural pharmacies:

- **Medication Access Issues**: Current regulations limit pharmacists to providing a one-week emergency supply of medications. During the COVID-19 pandemic, pharmacists demonstrated their ability to safely provide one-month supplies, showing this is a feasible and beneficial policy change.
- **Mental Health Support**: Many rural areas lack sufficient mental health services, leaving pharmacists to manage patients with complex mental health needs. Training and resources are essential to equip pharmacists to handle these

situations effectively and ensure safety. We also require training for our pharmacy assistants as these staff are on the frontline.

Expanding the Scope of Services

To address the healthcare challenges of our communities, expanding the scope of practice for pharmacists is crucial. Key areas include:

- **Prescribing Authority for Common Conditions**: Empowering pharmacists to prescribe for conditions like UTIs, oral contraceptives, and skin conditions has significantly improved access to timely care. I recently had an elderly patient with shingles. By being able to prescribe antivirals she was able to start treatment immediately (this was Saturday lunchtime) rather than waiting hours at emergency and using their resources.
- Asthma and COPD Management: As part of initiatives targeting chronic conditions, pharmacists could play a vital role in managing asthma and COPD through patient education, medication management, and ongoing support. We supply salbutamol, however a more effective treatment would be a combination of a beta agonist with an inhaled corticosteroid.

Conclusion

Meeting the health needs of remote, rural, and regional communities in NSW requires comprehensive cross-jurisdictional cooperation, effective collaboration, and consultation with local stakeholders. Our pharmacies in Gunnedah and Narrabri are committed to doing more for our communities, especially in light of the reduction in GP numbers. Expanding the scope of practice for rural pharmacists will empower us to bridge healthcare gaps and deliver improved outcomes for patients.

Thank you for considering this submission as part of the inquiry into the implementation of the Portfolio Committee No. 2 recommendations.

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