

Victorian Community Pharmacist Statewide Pilot

Pharmacist Information Pack - General overview – February 2025 Update

OFFICIAL

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This pack provides general information on the Community Pharmacist Statewide Pilot for participating pharmacists.

Overview of the pilot

The Department of Health (the department) is running a 12-month statewide pilot from October 2023 to October 2024 to test an expanded role for community pharmacists. The services have been extended to 30 June 2025 while the pilot evaluation is conducted.

In the pilot, appropriately trained community pharmacists are able to practice under a structured prescribing model to provide:

1. resupply of select oral contraceptive pills (OCPs) without a prescription for women (16 – 50 years)
2. antibiotic treatment for suspected uncomplicated urinary tract infections (UTIs) in women (18 – 65 years)
3. skin condition treatments for herpes zoster (shingles) and mild plaque psoriasis for people 18 years and older
4. additional vaccine administration by pharmacist immunisers and provision of travel health advice

Pharmacist immunisers participating in the pilot's vaccination and travel health stream must complete further training to administer select travel and other vaccines including hepatitis A, hepatitis B, poliomyelitis and typhoid vaccines.

Structured prescribing means that participating pharmacists have a limited authorisation to prescribe medicines under legislation and will prescribe medicines under a protocol, and within the framework set by the Victorian Government. This differs from autonomous prescribing that occurs where a prescriber has a broad authorisation to prescribe medicine under legislation and prescribes within their scope of practice.

The pilot aims to increase access to affordable primary healthcare, ensuring Victorians can get the right care, at the right time, at the right place. Like all the department's programs, safety and quality care will be prioritised throughout the design and implementation process. An integrated approach is being taken whereby pharmacists are expected to communicate pharmacy interventions with people's regular general practitioner (subject to patient consent).

Pilot timing

Late September 2023: expression of interest (EOI) opened for community pharmacies

October 2023: training modules available for resupply of oral contraceptive pills and treatment of uncomplicated urinary tract infections.

27 October 2023: pilot commenced.

November 2023: training modules available for vaccine administration and travel health advice.

17 November 2023: Services for vaccine administration and travel health advice commenced.

February 2024: training modules available for herpes zoster (shingles) and mild plaque psoriasis.

March 2024: Secretary's Approval amended to include the provision of treatment for herpes zoster (shingles) and mild plaque psoriasis skin conditions. Treatment for the pilot's skin conditions commences.

October 2024: pilot services extended to 30 June 2025 while the pilot evaluation is conducted.

Monitoring of the services delivered will occur throughout the duration of the pilot. The pilot will be evaluated on the first 12 months of pilot operations

Eligibility

The pilot has an opt-in approach where community pharmacies and registered pharmacists working within these pharmacies can choose to join the pilot. Pharmacies are still able to join the pilot through submission of an expression of interest. There is no cap on the number of pharmacies or pharmacists that can join.

Participating community pharmacies and pharmacists must meet all eligibility requirements.

Pharmacy eligibility criteria

Community pharmacy premises must meet the following criteria to be able to participate in the pilot:

1. Be located in Victoria
2. Be registered with the Victorian Pharmacy Authority (VPA) with no conditions attached that would impact the safe use of medicines under the pilot
3. Have access to specified pharmacy software to enable clinical record keeping as required by the pilot. The specified software is MedAdvisor. More information is available below.
4. Have access to My Health Record conformant dispensing software to enable appropriate ability to view and contribute to the patient's My Health Record (further details below). Conformant dispensing software needs to be appropriately configured and utilised to ensure records are appropriately created and shared.
5. Communicates with the patient's general practitioner (GP) (where available and with patient consent) as required by the pilot
6. If providing UTI, OCP or skin condition services under the pilot:
 - a. Have a separate consulting room with a door that can be readily supervised to prevent unauthorised access and:
 - i. is not used as dispensary, storeroom, dose administration aid filling room or staff room
 - ii. provides adequate privacy/confidentiality
 - iii. provides sufficient space for patient, carer/accompanying person and pharmacist, as well as any necessary equipment and documentation
 - iv. has seating for the patient and carer/accompanying person
 - v. can accommodate people with disability
 - vi. has adequate lighting
 - vii. is maintained at a comfortable ambient temperature
 - viii. has a hand sanitation facility in the room or has ready access to a hand washing facility
 - ix. has access to disposable gloves
 - x. meets other requirements as specified in the [VPA Guidelines](https://pharmacy.vic.gov.au/standard-guidelines/)
7. If providing vaccination services under the pilot:
 - a. Meet the requirements of the Victorian Pharmacy Authority Guidelines, vaccination or injection facilities. Details available at [Victorian Pharmacy Authority – Standards, Guidelines and Resources](https://pharmacy.vic.gov.au/standard-guidelines/)

Pharmacist eligibility criteria

All participating pharmacists must meet the following criteria:

1. Be listed on the Australian Health Practitioner Regulation Agency (Ahpra) register with general registration type and with no conditions or undertakings on their registration
2. Be employed, contracted or otherwise engaged by a pharmacy that is participating in the pilot
3. Have successfully completed the required training to deliver the services proposed as specified in the Secretary Approval and pilot guidelines, prior to any service provision
4. Hold and agree to maintain appropriate insurance for the services proposed to be provided under the pilot.

Pharmacy owner eligibility criteria

Pharmacy owners must meet the following criteria for their community pharmacy to be able to participate in the pilot:

1. Hold a licence issued by the VPA with no conditions attached that would impact the safe use of medicines under the pilot
2. Consent to participate in, and abide by, the requirements of both the service provision and monitoring and evaluation components of the pilot for the services being delivered
3. Hold and agree to maintain appropriate insurance for the services proposed to be provided under the pilot.

Over the duration of the 12-month pilot, community pharmacies (pharmacy owners) participating in the pilot may experience staff turnover in their pharmacist workforces and therefore the piloted services offered in the pharmacy.

Expression of interest process (EOI)

Pharmacy owners will complete an online EOI form if they want their pharmacy/ies to join the pilot. This is expected to take under five minutes per form.

One form must be completed for each participating pharmacy premises.

Information needed for the EOI form

The pharmacy owner will be asked to provide information about the pharmacy premises, its contact details, and the details of the proposed participating pharmacists for that premises.

Completion of the EOI cannot be delegated as the owner must make a declaration as part of the EOI process.

The indicative information that should be prepared for the EOI process is listed here:

Applicant (pharmacy owner/director) contact information

- Pharmacy owner name, email, phone number
- Pharmacy owner Ahpra registration number
- VPA licence number

- Pharmacy contact name, email, phone number and role e.g. pharmacy manager/pharmacist in charge

Company information

- Entity type (e.g. sole trader, partnership, corporate entity, body corporate, other)
- ABN
- Registered company name
- Trading name
- Registered address
- Site address (if different to registered address)
- VPA premises number
- Registered email
- Registered phone number
 - Company director name (if different from above)
 - Company contact person name, position, email (if different from above)

Pharmacy premises and service information

- The services you wish to provide under the pilot
- Pharmacy name, address, phone number, email and fax number
- VPA premises number
- Total number of Ahpra registered pharmacists employed and FTE
- Type of pharmacy (e.g. banner group, independent pharmacy)
- Can provide services in languages other than English (e.g. spoken by pharmacists – verbal and/or written)
- Number of pharmacists on duty during standard business hours
- Details of person responsible for overseeing pilot services name, position, email, phone number, Ahpra registration number)
- Health Provider Identifier for the Organisation (HPI-O – further details available below)
- For pharmacies which have an existing MedAdvisor subscription: MedAdvisor ID – to access this ID go to [How to obtain Pharmacy MedAdvisor ID](https://support.medadvisor.com.au/hc/en-us/articles/4406856268953-How-to-obtain-Pharmacy-MedAdvisor-ID) <https://support.medadvisor.com.au/hc/en-us/articles/4406856268953-How-to-obtain-Pharmacy-MedAdvisor-ID>

Pharmacist information

- Pharmacist name
- Pharmacist Ahpra registration number
- Pharmacist email, full or part time (or other) employment status in the pharmacy

Declaration

The pharmacy owner will be required to agree to the statements below to participate in the pilot. This information will be incorporated into the EOI online form.

DECLARATION

1. I declare that:
 - a. I own or am otherwise authorised to act on behalf of the pharmacy named in this EOI form;
 - b. The information I have provided in this form is complete, true and correct; and
 - c. If I have provided any personal information in relation to another person, such as my participating pharmacists, I have confirmed that they agree to the disclosure to the department and to participate in the program.

2. I will notify the department within 5 business days if there are any changes to the business name or contact details, or a change in the clinical services provided by the pharmacy named in this EOI form.
3. I understand that in order to participate in the Pilot:
 - a. I must enter into a funding agreement with the Department of Health, and I will be provided with a copy of this in due course;
 - b. my participating pharmacists and I must adhere to the terms and conditions set out in the funding agreement, and any guidelines and protocols of the Pilot issued by the Department of Health;
 - c. I will need to meet the pharmacy owner eligibility criteria for participation in the Pilot; and
 - d. the pharmacy named in this EOI form and my participating pharmacists will need to meet the eligibility criteria for participation in the Pilot.
4. I understand that giving false or misleading information is a serious offence and may lead to me having to repay the reimbursement amounts and/or the grant provided.

Funding Agreement

Once the EOI form is completed and validation has been successful, the pharmacy owner will be sent a Funding Agreement by the department.

This will constitute the legal arrangement between the department and the pharmacy owner, setting out the conditions of participation in the pilot and for receipt of reimbursements. Following receipt of the funding agreement, you may indicate your intention to be bound by the agreement by providing any activity outlined in the Pilot.

Provision of services

Pharmacy owners will be able to select the service provision model which works best for their premises, staffing and the community they serve.

It is encouraged that pharmacies provide all four piloted services during opening hours; however, it is recognised this may not be appropriate in every situation.

Each pharmacy owner will be able to choose to implement the piloted services which will work best for their premises and staffing levels.

The selection of pilot services, when they are offered, and the commencement date for each service is a decision for the business. There are no specific requirements for hours of operation or a service commencement date.

New services can be sequentially added to the pharmacy's service offerings over time and as pharmacists successfully complete the required training. Pharmacy owners will be asked to provide an update to the department when there is a change in the services offered.

People with or without a Medicare card and international students will be eligible to seek a service under the pilot.

Booking process

It will be a decision for each pharmacy owner whether they wish to use an established a booking process for the consultations, or whether they will accept walk in consultations – at all or select times of the week.

Management protocols

Each of the pilot's four services will be supported by clear and detailed management protocols.

The protocols have been developed using evidence-based approaches by Safer Care Victoria and the department, with oversight from the pilot's Clinical Reference Group, and travel medicine experts. The management protocols align to the Therapeutic Guidelines Ltd and other best-practice guidelines as appropriate.

The management protocols will support all decision-making and set out when a patient can be treated under the pilot, and under what circumstances they will need to be referred to their usual GP or other healthcare provider.

Compliance with the management protocols will be mandated in the Secretary Approval that authorises the administration, sale or supply of the specified Schedule 4 poisons relevant to the piloted services.

Coordination of care between pharmacists and general practitioners

Integrated care is an important aspect of the pilot, and the patient's usual GP is expected to be provided with information on the patient's condition and treatment.

Pharmacists will be required to obtain consent from each patient, to inform their GP of the consultation and/or treatment. If the patient provides appropriate consent, pharmacists will also be required to update My Health Record with treatments provided under the pilot.

Pharmacists will be required to document each consultation in specified pharmacy software.

Pharmacists may provide each person with a printed consultation record to share with a GP if they need to seek further care.

If a person does not have a regular GP, it is good practice to encourage the person to do so.

People seeking treatment, but who are ineligible under the management protocols, will need to be referred to a GP or other healthcare provider.

Dispensing software and My Health Record

Pharmacies will continue to dispense medication per routine local practice as part of the pilot. Details regarding the treatment of a person and the medications supplied will also need to be documented within software which supports compliance with the management protocols. There will be no requirement to provide data relating to the pilot directly from dispensing software.

Pharmaceutical Benefits Scheme (PBS) claims made by pharmacies and processed by Services Australia are routinely available in My Health Record. Medication supplied within this pilot is outside the scope of the PBS and as such PBS records will not be created within My Health Record for the pilot.

Dispense records are distinct from PBS records in My Health Record and covers dispensing events for both PBS and non-PBS medications. Dispensing software in use is expected to send dispense records to My Health Record. Participating pharmacies therefore need to be operating software conformant with My Health Record.

Dispensing software that meets the technical and security requirements of the My Health Record system is known as conformant software. Most common dispensing software systems conform to the My Health Record standard and can connect directly to the My Health Record system. This means that pharmacists are generally able to access and view a patient's My Health Record directly through their conformant dispensing software if they are providing healthcare for that individual and have been granted access by the organisation.

A list of conformant software is available from the [Digital Health website](https://www.digitalhealth.gov.au/healthcare-providers)
<<https://www.digitalhealth.gov.au/healthcare-providers>>

In addition to operating a conformant platform, participating pharmacies are expected to be routinely uploading dispense records to My Health Record. Individual local software may have local configurations or

specific workflow requirements to enable this. As part of the onboarding process, the Health Provider Identifier for the Organisation (HPI-O) will be collected which will enable visibility of high-level data regarding dispense record uploads.

To enable dispensing data to be uploaded to My Health Record from dispensing systems, specific data must be captured in those systems in relation to the patient and pharmacist. As dispensing software may differ between vendors in how the data is managed and used, please refer to your dispensing system vendor for comprehensive guidance on these requirements.

Patient data:

To upload documentation (including dispensing records) to a patient’s My Health Record, the following patient information must be captured in dispensing systems:

- First name
- Surname
- Date of birth
- Gender
- One of the below:
 - Alphanumeric identifier such as Medicare card number (including individual reference number), Department of Veterans’ Affairs (DVA) number or Individual Health Identifier (IHI)
 - Patient address

The omission of one or more of these data points may mean dispense records or other documents intended for sharing to My Health Record do not upload. Workflows should be implemented (ideally supported / enforced by local dispensary software) to routinely collect the above information.

Pharmacist data:

Dispensing data may only be uploaded to My Health Record where they are accompanied by a valid Health Provider Identifier – Individual (HPI-I) for the pharmacist.

Pharmacists wishing to upload documentation to My Health Record must ensure their HPI-I is recorded appropriately to allow for use by the dispensing software.

IT systems

Participating pharmacies are required to have a MedAdvisor subscription to deliver services within the pilot.

Pilot Services	Required Subscription
Urinary Tract Infection	MedAdvisor Core
Oral Contraception	
Skin conditions (herpes zoster (shingles) and mild plaque psoriasis)	
Travel Health + Immunisations	

Pharmacies currently participating in the pilot that are on MedAdvisor Essentials will continue to have access to the Urinary Tract Infection, Oral Contraception and Skin Condition services if eligible.

For more information or to subscribe to MedAdvisor Core, please email MedAdvisor at info@medadvisor.com.au

Note that the EOI form will require a MedAdvisor ID number. You can find your MedAdvisor ID at [How to obtain Pharmacy MedAdvisor ID](https://support.medadvisor.com.au/hc/en-us/articles/4406856268953-How-to-obtain-Pharmacy-MedAdvisor-ID) <https://support.medadvisor.com.au/hc/en-us/articles/4406856268953-How-to-obtain-Pharmacy-MedAdvisor-ID>.

Pharmacy reimbursement

Pharmacies will be reimbursed for each consultation conducted to compensate for additional administration and data collection required to support the pilot's monitoring and evaluation. The reimbursement amount set will be \$20.00 per completed consultation as specified below.

The service fee of \$20.00 was set based on the MBS item number 82205 (professional attendance by a participating nurse practitioner lasting less than 20 minutes).

There will be capping of the cost of dispensed medication charged by the pharmacy for patients participating in the pilot. This will reflect the co-payment level they would be eligible for under the PBS and ensures equity of access. The department will reimburse the pharmacy for the amount which would be payable under the PBS.

If the medicine is not listed under the PBS, the patient will pay full price as they would if it was prescribed by a GP.

Note the amounts mentioned here are exclusive of GST. The GST will be applied in the pharmacy service fee and medication payments.

Uncomplicated UTI, OCP and skin condition consultations

The patient seeking treatment by pharmacists will not pay a consultation fee. The Victorian Government is providing reimbursement of \$20 to participating pharmacies for each eligible consultation service conducted.

Pharmacies and pharmacists are not permitted to charge the patient an additional consultation or administration fee.

A reimbursement fee will be paid following the conclusion of the consultation, whether medication was supplied or not. This is illustrated in the following example:

The pharmacist starts a consultation with an eligible person in-scope for a UTI consultation. However, during the consultation it is determined that the UTI is not uncomplicated due to factors identified under the management protocol. The pharmacist will complete the data collection, inform the patient of the outcome, and a referral to the patient's usual GP or other healthcare provider will be supplied. This constitutes a consultation, even though no medication is provided.

When a person presents for a service who is ineligible for treatment and is clearly outside the scope of the pilot services, the \$20 reimbursement fee will not apply. This is illustrated in the example below:

A person presents for UTI treatment who is clearly outside the specified age range or presents with an out-of-scope condition or medical emergency. The pharmacist conducts a short screening process, rather than a consultation. The pharmacist advises the person that they are unable to provide treatment and directs the person to seek alternate treatment pathways. In this situation no data is recorded for the purposes of the pilot.

Uncomplicated UTI, OCP and skin condition medications

Medications provided for an uncomplicated UTI, skin condition or as an OCP will be from the specified list within the management protocol and will be supplied to patients at specified prices. The price is designed to be the same as if that patient had accessed it via the PBS. The reimbursement to the pharmacy will offset any gap. This will also apply for concession card holders who will pay the same as if they were purchasing the medication with a prescription and for Aboriginal and Torres Strait Islander people eligible for Close the

Gap. Similarly, for international students and people without a Medicare card, the cost will be the same as if the medication was purchased under the PBS.

The medications will not count towards the patient's PBS Safety Net, which will be made clear to the patient, by the pharmacist during the consent phase of the consultation.

The medications to be provided under the UTI, OCP and skin management protocols will have set maximum pricing for each of the following categories which the patient can be charged:

- General patient
- Concessional
- Close the gap
- No Medicare card with reciprocal agreement
- No Medicare card without reciprocal agreement.

Pricing details will be provided in a subsequent factsheet. It is intended that pharmacies will not be negatively impacted in providing medications under the pilot compared to provision with a prescription.

Note that extra charges such as brand premiums and special patient charges will be the responsibility of the patient as they are the patient's responsibility under the PBS.

Vaccinations

A \$20 per person reimbursement fee will be made to pharmacies for the additional administrative and data provisions to support the pilot's monitoring and evaluation of the vaccination stream, on the administration of at least one approved vaccine as per the management protocol. Payment is not a reimbursement for a consultation fee or the administration fee of a vaccine. Approved travel vaccine(s) must be administered for the purpose of overseas travel.

Pharmacies may charge the patient a consultation/vaccine administration fee, plus the cost of any administered vaccines. The department will not set any cap on this fee.

Evaluation

An independent evaluation will be conducted of the pilot in late 2024. Information collected during the pilot with informed consent from pharmacists and patients will contribute to this evaluation.

Consent

By participating in the pilot, pharmacy owners and pharmacists are consenting to the collection of the information submitted which will be used to monitor the pilot and inform the evaluation.

Pharmacy owners will be asked to provide consent for themselves, with participating pharmacists to be contacted to provide consent for the purposes of surveys or interviews to inform the evaluation of the pilot.

Part of the consultation process will include obtaining informed consent from the patient, to be recorded in the IT system, including consent:

- to treatment
- to have information collected, stored and used for the purpose of the pilot's monitoring and evaluation
- for the pharmacist to provide a referral or information to the patient's usual GP
- for the treatment information to be uploaded into the patient's My Health Record.

Data collection

Data to support monitoring and evaluation will be collected with consent via the supporting IT systems and separate survey or interview processes. It will be collected, stored and used in line with all legislative requirements for data protection and privacy.

Training

Each participating pharmacist will be required to successfully complete specific training modules for each clinical stream of the piloted services they will be providing.

Training will be available online and more information will be made available in coming weeks.

There is expected to be one module required to be completed per clinical stream and each one is expected to take between 2 and 7 hours to complete.

Legal basis for pharmacist provision of Schedule 4 poisons without a prescription

The *Drugs, Poisons and Controlled Substances Act 1981* (the Act) has been amended. The *Drugs, Poisons and Controlled Substances Regulations 2017* (the Regulations) are in the process of being amended. This will authorise pharmacists to administer, supply or sell Schedule 4 poisons without a prescription. It also provides for the Secretary of the department to approve the administration, supply or sale of specified Schedule 4 poisons under these authorisations.

Amendment of the Regulations will enable the Secretary to issue a Secretary Approval that will require compliance with management protocols for the provision of Schedule 4 poisons to treat the health group conditions included in the scope of the pilot or the requirements that apply to the administration of additional vaccines by trained pharmacists.

Pharmacists operating under the pilot will be expected to comply with all aspects of these authorisations. Further details will be provided as they become available.

These authorisations permit pharmacists to undertake activities under the pilot without committing an offence under the Act or the Regulations. These authorisations are distinct from any legal arrangements entered into between the department and the owner of the community pharmacy participating in the pilot under a Funding Agreement.

FAQ

How do I update pharmacy information, for example a change in contact details?

Pharmacy owners will be able to email the department at AdminCommunityPharmacyPilot@health.vic.gov.au to provide details of any changes and this will be updated accordingly.

How do I update service information, for example additional of a new service?

Pharmacy owners will be required to email the department at AdminCommunityPharmacyPilot@health.vic.gov.au to provide details of any changes in piloted services offered and this will be updated accordingly.

What do I do if new pharmacists join my pharmacy and will provide the pilot services?

Pharmacy owners will need to email the department with details of the new pharmacist(s) including name, registration number and email (optional).

What do I do if I wish to withdraw from the pilot?

Pharmacy owners will be able to email the department at AdminCommunityPharmacyPilot@health.vic.gov.au to provide details of any changes.

How do I contact the department to provide feedback?

Participating pharmacists will be able to email the department at AdminCommunityPharmacyPilot@health.vic.gov.au to provide feedback on the pilot.

Pharmacists can also access the department's complaints processes available from our [Feedback and complaints page](https://www.health.vic.gov.au/feedback-and-complaints) on the Health.vic website <www.health.vic.gov.au/feedback-and-complaints>.

What should a pharmacist do if they wish to participate in the pilot?

Employee pharmacists should speak with their pharmacy manager/owner if they are interested in participating in the pilot. Employee pharmacists are not required to complete the EOI application.

What is the feedback and complaints process for patients?

Information on the feedback and complaints processes for patients is available from our [Feedback and complaints page](https://www.health.vic.gov.au/feedback-and-complaints) <<https://www.health.vic.gov.au/feedback-and-complaints>> on the Health.vic website <www.health.vic.gov.au/feedback-and-complaints>.

For feedback or to make a complaint, patients can take the following steps to get the complaint resolved:

Step 1. Discuss their feedback and complaint with a staff member from the community pharmacy where they received the service.

Step 2. If the feedback or complaint cannot be resolved at Step 1, or the patient is dissatisfied with the outcome, they can choose one of the following ways to lodge a formal complaint with the department:

- Submit the feedback or complaint online via [our online form](#).
- <https://feedback.dhhs.vic.gov.au/layout.html#/DH>
- Email Feedback and complaints team via health.feedback@health.vic.gov.au
- Mail: Health Feedback, GPO Box 4057, Melbourne, Victoria, 3000.
- Phone: [1300 229 075](tel:1300229075). For more information, see our [Contact us](#) page. www.health.vic.gov.au/contact-us

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