

Pharmacist Information Pack

Pharmacist Initiatives

Urinary Tract Infections Pilot and Oral Contraceptive Extended Supply

Overview

The Department of Health (the department) is progressing the recommendations from the [Pharmacist Scope of Practice Review Final Report](#) by implementing two key pharmacist initiatives:

1. **Urinary Tract Infections Pilot** - a 12-month statewide pilot commenced on 1 March 2024 to allow appropriately trained and endorsed community pharmacists to practice under a structured prescribing model to assess patients presenting with suspected uncomplicated urinary tract infections (UTIs) and provide antibiotic treatment in specific circumstances.
2. **Oral Contraceptive Extended Supply Initiative** – from 1 July 2024 appropriately trained and endorsed community pharmacists will be able to provide an extended supply (up to 12 months) of the oral contraceptive pill (OCP) to eligible patients under a structured prescribing model.

Structured prescribing means that participating pharmacists have a limited endorsement to prescribe medicines under a protocol, and within the framework set by the Tasmanian Government. These initiatives aim to increase access to affordable primary healthcare, ensuring Tasmanians get the right care, at the right time, at the right place.

Safety and quality care will be the highest priority for the initiatives. An integrated approach will be taken where pharmacists will be expected to communicate pharmacy interventions with the patient's regular general practitioner/ general practice.

Timing

	UTI Pilot	OCP Extended Supply
Training modules available	January 2024	June 2024
Application forms and resources available	January 2024	June 2024
Applications to be submitted *	January/February 2024	June/July 2024
Endorsement provided to pharmacists *	February 2024	June/July 2024
Commencement Date	1 March 2024	1 July 2024
Pilot Concludes	1 March 2025	N/A

* **Note:** applications and endorsements can continue to be provided past the dates listed in the table

Approval to Participate in the Initiatives

The initiatives will take an opt-in approach where endorsed pharmacists working within an approved premises can choose to join the UTI pilot and/or OCP extended supply initiative. There is no cap on the number of pharmacies or pharmacists that can participate in the two initiatives.

Premises and individual pharmacists must meet all eligibility requirements and be approved to participate in the initiatives. Those premises who have already received approval to participate in the UTI Pilot are able to have their approval automatically extended for supply of the OCP, please notify the project team if your pharmacy wishes to offer one initiative but not both.

Individual pharmacists will need to submit a completed application form for approval. Premises will need to complete a separate application form to become a newly approved pharmacy site. The applications will then be assessed for approval by the Department of Health. The Department will notify applicants of the outcome of those assessments.

Completed application forms are to be emailed to: pharmacyscope@health.tas.gov.au

The application forms can be obtained by visiting the website at:

<https://www.health.tas.gov.au/pharmacyscope>

Provision of services

Pharmacies will be able to determine a service provision model which works best for their premises, staffing and the community they serve.

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

Booking process

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

Management protocols

The management and treatment for suspected uncomplicated UTIs and the extended supply of the OCP is supported by clear and detailed management protocols.

The protocols have been developed using evidence-based approaches by the Department of Health, with oversight from the Steering Committee and medical experts.

The management protocols support decision-making and set out when a patient can be treated for a UTI or have extended supply of the OCP granted, and under what circumstances they will need to be referred to their usual GP or other healthcare provider.

Compliance with the management protocols is an essential requirement of participation in the initiatives.

The protocols will not cover all possible clinical circumstances and pharmacists are required to exercise their professional judgement in adapting the treatment guideline to individual circumstances.

Management protocols can be obtained by visiting the website at:

<https://www.health.tas.gov.au/pharmacyscope>

Declining supply

Situations will arise where patients are appropriately not provided with the care that they expect (e.g. not provided antibiotics or extended supply of the OCP). It is recommended that these consultations are fully documented, that patients are fully informed of the reasons that supply is unable to occur and provided with a consultation summary. Information should also be provided to their GP if the patient consents to this information being shared.

Coordination of care between pharmacists and general practitioners

Integrated care is an important aspect of quality treatment, and the patient's usual GP (or GP practice) is expected to be provided with information on the patient's condition and treatment, it is encouraged for this to occur regardless if antibiotics or an extended supply of the OCP is provided or not.

Pharmacists will be required to obtain consent from each patient in order 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 dispensing records of any medication provided.

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

Pharmacists are encouraged to provide each patient with a printed consultation record and are required to share a copy of the consultation summary with the patient's nominated GP.

The project team strongly recommend that information is sent by a secure transfer system such as *Healthlinks*.

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

People seeking treatment, but who are ineligible under the management protocols, will need to be referred to a GP or another appropriate healthcare provider (e.g. Family Planning Tas, Sexual Health Service).

Consultation Costs

The Tasmanian Government will provide pharmacies with a \$20 consultation fee for each formal consultation delivered under the UTI pilot project. Services provided as part of this pilot will be free to patients for the period of the pilot.

Pharmacies will be able to set and charge a consultation fee for patients seeking a resupply of the oral contraceptive pill.

Patient Follow up (UTI management)

The Protocol for Management of Urinary Tract Infections requires the treating pharmacist to arrange follow up with their patient at around day 3 to 5 after their consultation. There is no specified communication method - SMS and phone are suitable including automated services. It is recommended that patients are encouraged that they should see a GP if their symptoms have not resolved and inform them that a voluntary survey from the department will be sent to them shortly.

Data collection (UTI management)

Data will be collected with patient consent via the supporting IT systems and a follow up voluntary survey with each patient. Data will be collected, stored and used in line with all legislative requirements for data protection and privacy.

Consent

By participating in these initiatives, pharmacists are consenting to the collection of the information gathered which will be used to monitor the effectiveness of the initiative and inform any evaluation.

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

- to treatment and to understand that antibiotics or an extended supply of the OCP may not be provided based on the clinical consultation
- to have information collected, stored and used for the purpose of 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.

A patient handout will be available to assist in this consent process.

Training

Each participating pharmacist will be required to successfully complete a specific training module for the management and treatment of suspected uncomplicated UTIs in women and for the extended supply of the OCP.

Training is available online and can be accessed at locations listed below (pharmacists can choose which training to undertake and are only required to complete one UTI training module and/or one OCP training module) there may be costs associated with these courses:

Organisation	Online Module	Online Module
The Pharmaceutical Society of Australia	UTI Training	OCP Training
The Australasian College of Pharmacy	UTI Training	OCP Training

Adverse Outcomes and Clinical Incidents

Should pharmacists become aware of adverse outcomes involving patients participating in the these initiatives such as adverse drug reactions, escalation of care (e.g. patient requiring hospitalisation) or clinical errors, pharmacists are advised to follow the steps below:

1. Ensure the patient has appropriate clinical care, referral and follow up.
2. Thoroughly document the details of the incident in your electronic clinical system.
3. Inform your professional indemnity insurer.
4. Inform the Department of Health Pharmacy Scope team on pharmacyscope@health.tas.gov.au