

Submission to the Parliamentary Standing Committee of Public Accounts

Inquiry into the Tasmanian Government's continuing response to the COVID-19 pandemic



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Purpose of this submission

The Pharmaceutical Society of Australia (PSA), Tasmanian Branch, is pleased to make this submission to the *Inquiry into the Tasmanian Government's continuing response to the COVID-19 pandemic.*

PSA's comments are based on the experience of pharmacists in relation to the decisions and actions taken by the Tasmanian Government in measures implemented since the tabling of the Public Accounts Committee's first report in August 2021. PSA's feedback focuses on access to essential medicines and the COVID-19 vaccination rollout and uptake.

About PSA

PSA is the only Australian Government-recognised peak national professional pharmacy organisation representing all of Australia's 36,000 pharmacists working in all sectors and across all locations.

PSA is committed to supporting pharmacists in helping Australians to access quality, safe, equitable, efficient and effective health care. PSA believes the expertise of pharmacists can be better utilised to address the health care needs of all Australians.

PSA works to identify, unlock and advance opportunities for pharmacists to realise their full potential, to be appropriately recognised and fairly remunerated.

PSA has a strong and engaged membership base that provides high-quality health care and are the custodians for safe and effective medicine use for the Australian community.

PSA leads and supports innovative and evidence-based healthcare service delivery by pharmacists. PSA provides high-quality practitioner development and practice support to pharmacists and is the custodian of the professional practice standards and guidelines to ensure quality and integrity in the practice of pharmacy.

Pharmacists in Tasmania

In Tasmania, there are 900 registered pharmacists practising in diverse settings and locations including, for example: community pharmacies, public and private hospitals, aged care facilities, general medical practices, disability care homes, Aboriginal Community Controlled Health Organisations, poisons information centres, Primary Health Networks, public health organisations, academia, pharmaceutical industry, the military, Tasmanian Government departments and agencies, and other private sector organisations.

Introduction

PSA recognises that public health measures will need to continue to evolve as we transition to living with COVID-19, including better managing public health responses to ongoing outbreaks and variants. The experience of the pandemic, and the outcomes of various measures implemented by the Tasmanian Government provide the opportunity for review and reflection, so that future responses can be refined and improved. PSA believes it is important to have flexible and adaptable responses since public health emergencies will extend beyond COVID-19 in future years – as has been the case with recent experience of significant flooding in certain parts of our state.

PSA acknowledges the collaborative approach taken by the Tasmanian Government throughout the COVID-19 pandemic. In particular, the COVID-19 stakeholder group convened by Health Minister Sarah Courtney, and continued by Premier Jeremy Rockliff in his capacity as Health Minister, to bring all key health sector organisations and stakeholders together to hear concerns and provide updates was extremely valuable and much appreciated.

As essential frontline health professionals, pharmacists have contributed significantly during the COVID-19 pandemic (and continue to do so) to deliver on the Tasmanian Government's health policy objectives and measures. Therapeutic goods, including medicines, medical devices and vaccines are core interventions in health care and their use is steadily increasing as Tasmanians rely on them for acute, chronic or complex health conditions as well as preventive care.

During a pandemic or other public health emergency, access to essential medicines has been one of the first issues impacted, often with significant consequences. Pharmacists will continue to oversee and facilitate safe and appropriate use of medicines to improve people's health and quality of life generally, but especially with regards to a pandemic or emergency, it is critical that the Tasmanian Government demonstrates foresight to integrate the expertise of pharmacists in planning and implementation to ensure the health and safety of Tasmanians are not compromised.

Reopening of the Tasmanian Border

The Tasmanian Government's *Reconnecting Tasmania Plan*, which reflected the *National Plan to Transition Australia's National COVID-19 Response*, focussed on easing restrictions with increasing levels of vaccination coverage. PSA believes this approach and staged reopening of Tasmania's borders on 15 December 2021 were generally well considered and executed.

There were, however, several measures that PSA would like to provide feedback on – as outlined here:

- Masks. There was an initial period after the borders reopened when mask wearing requirements were not mandatory in community pharmacies. This created confusion and significant stress for pharmacy staff and consumers as practices across pharmacies, despite being frontline healthcare settings, were inconsistent. Given COVID-19 transmission was known to be primarily airborne, PSA suggests there should have been stronger requirements and clearer messaging given the ongoing high-risk nature of community pharmacy settings at this time.
- **PPE.** The provision of Personal Protective Equipment (PPE) to community pharmacies was inconsistent. For example, the Primary Health Network distributed face shields limited to two per pharmacy at one stage, as well as gloves and masks; however, these were only to be used in very rigid circumstances. With such limited and inflexible supply conditions, it was somewhat discouraging to actually use them to protect pharmacists and pharmacy staff. Nevertheless, pharmacists did report there being a willingness to support pharmacies with

their WorkSafe plans to keep staff and customers as safe as possible under the circumstances.

- RATs. Unsurprisingly, given similar reports across the country, there were consistently high levels of frustration experienced and reported around the provision of rapid antigen tests (RATs) for concession card holders (initially through community pharmacies and subsequently via Service Tasmania). January was particularly stressful as consumers clamoured for tests and pharmacies were unable to indicate supply timeframes or mechanisms. It also reflected poorly when supermarkets and other suppliers had RAT tests for sale, but patients then came to the pharmacy to ask how to use some of the more complex testing kits. While this was a national issue thought should have been given to using the existing pharmaceutical supply chain for distribution from the outset. PSA would encourage the use of the community pharmacy network as an accessible distribution option for similar programs in the future. There are over 160 community pharmacies across the state, many of which are open extended hours and weekends, compared to 27 Service Tasmania locations with varying hours of opening during business hours.
- PCR. Feedback received by PSA indicated that there appeared to be good prioritisation of analysis of Polymerase Chain Reaction (PCR) testing and communication of results for healthcare workers to facilitate their return to work. However we note that management of close contacts at various points remained problematic. In particular return to work for close contacts was extremely cumbersome and onerous Public Health referred to Worksafe Tas, Worksafe Tas referred to Public Health in a loop process to fulfil the 'application to continue to work as a close contact'. For sole pharmacists also trying to fulfil their health professional role and business manager role this was particularly difficult.

As the reopening plan hinged on the rollout and uptake of vaccination services, PSA has provided further comment below under the section on COVID-19 Vaccination Uptake and Rollout.

Return to School Plan

The plan for the return of schools in February 2022 as a priority while also ensuring the wellbeing of Tasmanian students and teachers involved vaccination uptake (albeit not mandatory for) and other public health measures.

Although uptake of COVID-19 vaccination was reasonable by February 2022, even higher rates of vaccination in school-aged children would have been possible if they had been eligible to receive COVID-19 vaccines through local community pharmacies. On 25 March 2022, after the return to schools, PSA welcomed the Tasmanian Government's announcement when pharmacist immunisers became eligible to provide COVID-19 vaccinations for children aged 5–11 years of age through community pharmacies. PSA suggests there was an unnecessary delay in allowing COVID-19 vaccinations, accessible through community pharmacies, to be delivered to this age cohort.

PSA also believes that the temporary suspension of school-based immunisation programs may have impacted on vaccination rates of some childhood vaccines. For example, the percentage of girls aged 11-15 years who completed their course of Human Papilloma Vaccine (HPV) in the same calendar year fell nationally by 11.5 percentage points from 2019 to 2020 – Tasmania experienced the worst reduction in course completion with a drop of 16.9 percentage points. In future, if there are delays in accessing vaccines through school-based programs, PSA would strongly recommend the Tasmanian Government consider providing access to those vaccines through pharmacist immunisers in community pharmacies.

Indoor Air Quality

PSA applauds the Government for use of air-purifiers and CO₂ monitoring in school classrooms to improve indoor air quality and reduce transmission rates. COVID-19 like many others is an airborne virus and any mitigation steps require ongoing vigilance in this area in particular. PSA would strongly recommend Worksafe Tasmania be tasked with setting minimum indoor air quality and ventilation guidance for all businesses including healthcare settings to reduce risk. The Worksafe Tasmania current COVID-19 risk assessment for businesses makes no mention of indoor air quality or provides any advice or steps to take in a risk mitigation of airborne transmission.

The WHO states "Understanding and controlling building ventilation can improve the quality of the air we breathe and reduce the risk of indoor health concerns including prevent the virus that causes COVID-19 from spreading indoors." With the lapsing of any isolation requirements and merely "encouraging those unwell to stay home" as per the National and Tasmanian Government COVID-19 guidance frontline pharmacy healthcare workers are at greatest risk as it is impossible to pre-screen people attending the pharmacy for advice on symptom management or to seek an absence from work certificate. It is not until they approach for assistance we are able to even consider if they may be actively shedding COVID-19. Most who do so are often unmasked putting our frontline staff at risk, in particular our pharmacist workforce who are already in high demand. If pharmacists become unwell, and are unable to work the current workforce shortages, mean pharmacies have no choice but to close and hospital teams will also suffer as will the wider community. Any steps that can be taken to reduce transmission risk in pharmacy workplaces should be funded including improving indoor air quality and flow to international standards.

Consideration should be given to supporting all Tasmanian businesses to improve indoor air quality in Tasmania with a small grants program towards purchasing CO₂ Monitors, HEPA air filtration units or upgrades to existing air conditioning to meet higher standards.

The previous \$10,000 grants under Minster Courtney while welcome were focused on fomite (surface) transmission and store modifications including sneeze barriers. Some pharmacy owners had delays in accessing grants as they were tied to ABN numbers and not per business location.

COVID-19 Vaccination Uptake and Rollout

Prior to and during the COVID-19 pandemic, PSA repeatedly called for the scope of pharmacist-administered vaccination services to be expanded in Tasmania to ensure our state was in line with other jurisdictions in providing preventive care to Tasmanians (PSA's media release, 12 September 2019, available at: www.psa.org.au/expansion-of-tasmanian-pharmacist-vaccination-services).

PSA is proud to say that pharmacists played a critical role in supporting the rollout of COVID-19 vaccinations and continue to do so and promote uptake of booster doses as well. This is reflected in the 250,000 doses of COVID-19 vaccines administered (at 19 October 2022) by pharmacists through community pharmacies. Pharmacists have also had important roles within Tasmanian state clinics.

Despite the COVID-19 vaccination successes, there have been areas that PSA suggests warrant improvement, as outlined:

 Delayed pharmacy rollout. Despite PSA's advocacy, the timeframes associated with bringing community pharmacies into the vaccination rollout effort, and further, enabling pharmacist administration for eligible children, were too long in our view. This was extremely disappointing as it delayed access to the COVID-19 vaccine for many Tasmanians despite pharmacist immunisers being ready to deliver the service. • **Guidelines for pharmacist vaccination.** There should have been a better approach to the way guidelines for pharmacists were developed and implemented.

PSA is aware that, between August 2021 and March 2022, there were at least 11 versions of the guidelines. In addition to the multiple versions, the most up to date version was not always uploaded to the Department of Health website resulting in pharmacists being unsure of whether or not they were practising to the correct version. This appears to have been, at least in part, due to a lag time between when updated clinical guidance of the Australian Technical Advisory Group on Immunisation was formally published and when new pharmacy guidelines came into force in Tasmania.

PSA strongly suggests that, in future, Tasmanian guidelines should have provisions that automatically adopt the national advice. PSA understands the current version – *Community Pharmacy Provision of COVID-19 Vaccine in Tasmania Guidelines and Application Process* – now reflects this arrangement, however, PSA did recommend the change in approach from very early on in the pandemic to minimise administrative burden and clarify requirements.

Once community pharmacists became a mainstream provider of COVID-19 vaccinations, there was rapid uptake and this helped to ease the health burden on Tasmanians. Many people value the accessibility and availability of pharmacists delivering vaccination services in primary healthcare settings.

In fact, it is PSA's firm view that trained pharmacists must be able to administer all vaccines funded under the National Immunisation Program to all eligible patient populations, and to administer all other vaccines, with the exception of a select few specialised vaccines. This will improve access to vaccinations for all Tasmanians and reduce the burden of vaccine-preventable disease on the health system.

PSA remains concerned that uptake of booster doses, including the latest bivalent option, remains low with only 74% of Tasmanians (over 16yrs) having received their 3rd dose and approximately 130,000 having received a fourth dose. Community pharmacy, as the most visited health care provider, is best placed to continue efforts to improve booster dose uptake in the Tasmanian population.

PSA would strongly encourage the Tasmanian Government to undertake preparedness work to ensure efficient and effective delivery of annual COVID-19 vaccine boosters or variant vaccines in future as the need arises. Pharmacists are willing and able to assist in the rollout of future vaccination programs.

PSA's advocacy to adopt a consistent approach across the country for all pharmacist-administered vaccination services continues. It is not acceptable for any Tasmanian to be disadvantaged, through Tasmanian Government policy, by not being able to access life-saving vaccines that other Australians are eligible for. It is also unacceptable that the expertise of pharmacist immunisers continues to be undervalued, as reflected through the disparity in remuneration provided to pharmacists by the Commonwealth Government despite their same vaccination training and competency as other immunisers. PSA seeks the support of the Tasmanian Government for commensurate recognition of pharmacist immunisers.

Targeted Financial Support Programs and Payments

PSA welcomed the Government's measures, announced in August 2022, to expand access to antiviral medications. The financial support made available for community pharmacies in rural and regional areas for the purchase of antivirals was an important step in ensuring Tasmanians in those areas could have timely access to appropriate treatment if needed.

Continuing Response:

PSA applauds the government's continued encouragement of RAT testing within the community however we remain concerned reducing accessibility to free RAT tests to only 27 outlets of Service Tasmania hamper the spontaneous or serial use of tests for people developing respiratory symptoms, who may then be more willing to stay at home to prevent transmission.

PSA has been made aware the THS Statewide Pharmacy Services has done an outstanding job assisting patients with medication needs including arranging delivery for outpatient ongoing medications. We are aware this service is being phased out, reducing access for vulnerable Tasmanians who will now need to risk public transport and crowded waiting rooms to access vital medications, not available via their community pharmacy. While many community pharmacies will continue to offer delivery services the frequency and range of their delivery services are a significant cost burden, usually not passed on to the patient.

COVID@Home doctors regularly and continue to make use of community pharmacy delivery services to ensure prompt access to antiviral medication to treat COVID-19. The assistance in funding initial stocks of the antivirals in rural pharmacies was also welcomed. It is important to note getting these essential drugs to the end patient often involves multiple phone calls, faxed and then posted prescriptions, an onerous workload at both ends. Steps to digitise and use eScripts for COVID@Home patients, outpatient and Departments of Emergency where prescriptions are often forwarded to community pharmacy for dispensing outside the THS Pharmacy Department would be welcomed and encouraged. Specific consideration should be given to funding delivery for COVID-19 antivirals to reduce the cost burden to pharmacies.

In a similar vein we acknowledge the value of the regular stakeholder meetings in helping to manage many of the issues raised here. We believe there is significant value in morphing this working group into an ongoing health advisory capacity both to be on standby should there be another wave with a new variant requiring additional health measures and further develop a strategic and sustainable approach to primary health care system improvement in Tasmania. This includes other areas outside this review such as the upcoming changes to real time prescription monitoring program, improving digital interoperability with eScript formats for THS services and aged care and the recently announcedupcoming Scope of Practice Review for Pharmacists in Tasmania. Summary

In conclusion, it is PSA's view that while the Tasmanian Government's continuing response (since August 2021) to the COVID-19 pandemic was overall commendable, there are several issues that should be improved in preparation for any future public health emergencies. PSA's comments and recommendations are from the pharmacy profession's perspective and have focussed on timely and unhindered access to medicines without compromising patient safety.

All Tasmanians know it is inevitable that there will be significant natural events or health-related emergencies in the future. Our experience clearly demonstrates that every such emergency impacts on access to medicines, medication management advice and continuity of therapy. Acknowledging that some medicine-related arrangements are impacted by parallel Commonwealth Government arrangements, nevertheless, we must continue to monitor and assess actual and likely impacts on Tasmanians to plan and implement appropriate and innovative local arrangements.

With our population's continuing and growing reliance on medicines generally, the expertise of pharmacists will continue to be critical to the health and wellbeing of patients, carers, families and the

public. In particular, during public health emergencies, we must not continue to put pharmacists in an invidious position where they face unreasonable barriers in providing medicines, professional advice and continuity of care.

Pharmacists in the community are pillars of primary health care at times of disaster and uncertainty, as people look to them for support and trusted advice, as well as timely, accurate and unambiguous access to public health information. Pharmacists also continue to support patients and the community during extended periods of recovery.

PSA calls on the Tasmanian Government to harness the successes, demonstrate strong leadership, and develop robust and adaptable policies to build resilience and progress for the state of Tasmania. As the peak body for all pharmacists, PSA seeks opportunities to assist and work in partnership with the Tasmanian Government.

PSA would be pleased to provide any further information to this Inquiry or to appear as a witness to give evidence to the Committee if that opportunity arises.