

## Community Pharmacy Roadmap Program Development Template

Program/Service Quadrant	Public Health Promotion C – In-pharmacy Health Services and Programs
1. Program/Service Description	
a) Background	Health promotion is the process of enabling people to increase control over and improve their health, with the role of the health sector moving increasingly in a health promotion direction, beyond its responsibility for providing clinical and curative services <sup>1</sup> . There is growing evidence worldwide of the benefits and effectiveness of investing in health promotion programs. Health promotion programs deliver benefits for the community in promoting wellbeing, reducing preventable illness and lowering overall health care expenditures <sup>2</sup> .  In Australia, the most notable successes of health promotion have been the reduction in smoking rates, cardiovascular disease and skin cancer <sup>3</sup> . As Australia's most commonly used health-service provider, with approximately 400,000 people visiting our nation's 5000 community pharmacies each day <sup>4</sup> , pharmacies are ideally placed to deliver public health programs. In addition, community pharmacy may be able to capture hard-to-reach populations who do not utilise other health services.  Community pharmacies can be a key source of health information and advice in public health programs. Health promotion in the context of community pharmacy refers to delivering strategies aimed at prevention, early detection and treatment of disease. These include public health education, awareness raising activities, referral pathways and improving access to advice and information through community pharmacies. The monitoring and reporting of adverse reactions to medicines is also an important aspect of this public health and safety role.  Examples of recent successful health promotion programs delivered through community pharmacy are the Alcohol Standard Drinks Awareness Program, the Hepatitis C Public Health Promotion Pilot Program, the Pharmacy Continence Care Program and the Pandemic Preparedness Program.
b) Brief Description	A variety of health promotion activities are currently conducted through community pharmacy as normal business, including, but not limited to; smoking cessation; weight loss; sexual health; alcohol awareness; Quality Use of Medicines (QUM) and continence care.  These daily activities are supported by structured health promotion programs involving workforce development, networking opportunities with other health service providers where appropriate, and consumer resource development. In addition, programs developed involve key stakeholder organisations, leading to clear and consistent messages.  The possibilities for future programs include mental health, sexual health, infectious disease and lifestyle risk factors. As public health promotion often involves healthy lifestyle support, and screening/monitoring for risk factors, it is important that this template is cross-referenced with that of Health Checks – Monitoring and Screening (Quadrant C) and Healthy Lifestyle Support (Quadrant C).
c) Alignment with Government Policy	The nature of health promotion activities in community pharmacy often lend themselves to alignment with Government policy. The initiatives are often developed around key issues

 $<sup>^{\</sup>rm 1}$  'Ottawa Charter for Health Promotion' (November 1986) World Health Organisation

<sup>&</sup>lt;sup>2</sup> Press release 'Prevention is better than cure – you can count on it' (April 7 2003) Senator Kay Patterson, Minister for Health and Ageing.

<sup>&</sup>lt;sup>3</sup> 'Community Pharmacy's Role in Promoting Healthy Behaviours' (2007) Journal of Pharmacy Practice and Research Vol. 37(1):42-44

<sup>&</sup>lt;sup>4</sup> Guild Digest (2008) Pharmacy Guild of Australia

		which have been highlighted by Government policy. For example, the Hepatitis C Program
		aligns with the Third National Hepatitis C Strategy 2010-2013.
		Overall, health promotion activities are key components of the National Preventative Health Strategy and the National Primary Health Care Strategy.
d)	Expected Outcomes for Government and Community Pharmacy	Community pharmacy-based health promotion programs and activities would assist in achieving maximum efficiency and minimising total costs associated with implementing such activities under issue specific initiatives. This is because the established community pharmacy network provides a national, equitable-access platform, complete with highly qualified health professionals to disseminate clear and consistent messages and support.
		From a community pharmacy perspective, there will be a greater recognition of the role of community pharmacists in health promotion and public health activities. Community pharmacy will have the opportunity to develop a viable business involving service provision as an adjunct to product supply and will have a greater capacity to effectively utilise the increased number of new pharmacy graduates in a manner that benefits both pharmacy practice and the community. Pharmacy graduates will continue to have a positive outlook for community pharmacy as a career, supporting the viability of pharmacy education providers.
e)	Consumer Benefits	The provision of health promotion and public health activities through community pharmacy offers consumers a trusted resource of health information, literature and advice. Consumers are able to gather information which will help in making key decisions about their health, and are assisted with referral to support service or other health professionals.
f)	Who Performs the Service	<ul><li>Pharmacists</li><li>Pharmacy Assistants</li></ul>
g)	Collaboration with Other Health Care Professionals	Will service delivery require any formal collaboration with other health care professionals?  Yes – Cooperation and referral pathways to other issue-specific health professionals will be required.
	2. Implementatio	n and Enablers
a)	Stakeholder Consultation	Representative bodies from the following areas will need to be consulted in order to fully develop and implement a program:  Consumer organisations Issue specific organisations Funders Government bodies Pharmacy organisations Product sponsors Professional insurers Relevant other health professional bodies
b)	IT Requirements	Is pharmacy software required to deliver this program? Yes. IT solutions may assist in the delivery of health promotion programs. Existing pharmacy software would be adapted to support pharmacist-initiated interventions and to enable the collection of de-identified data for monitoring and evaluation of the programs.
c)	Infrastructure and Staffing	Is a private consultation area required to deliver this program? Yes. Existing consultation areas are likely to suffice, with modifications to ensure sufficient customer privacy where required.
		Is the program within the pharmacist's/pharmacy assistant's normal scope of practice? Yes

		Will an additional pharmacist be needed?  This will be dependent on the type and complexity of the program. In developing professional services that require an extended pharmacist consultation, consideration needs to be given to staffing resources.
d)	Training	Will additional formal training be needed?  Pharmacy graduates should be trained to a level where they can confidently provide support services upon registration.
		Training for pharmacists and pharmacy assistants should include on-line training where possible to maximise participation.
		Does any suitable training exist?  To be determined.  Available training will need to be investigated according to the program to be delivered.
e)	Supporting	Will a QCPP standard be required?
	Standards, Procedures and Templates / Checklists	Yes A standard for the delivery of health programs and services is available as part of QCPP 2 <sup>nd</sup> edition. As individual services are developed, the need for supporting checklists can be assessed and where not available, the development of new ones should be part of the program structure.
		Will professional guidelines and/or standards for pharmacists be required? Yes
		Are there any national guidelines which need to be taken into account in developing the program to ensure consistency with best practice?  Yes.
		A number of issue-specific national guidelines will be of assistance in developing programs, for example the National Health and Medical Research Council (NHMRC) Australian guidelines to reduce health risks from drinking alcohol, 2009.
f)	Legislation / Regulation Implications	It will be necessary to ensure all elements are aligned with relevant legislation.
	3. Funding	
Fund	ling Options	<ul> <li>Possible funding options include:</li> <li>Community Pharmacy Agreement</li> <li>Alternative Commonwealth Programs</li> <li>User-pays</li> <li>Other Private Health Insurance</li> <li>Has any funding for this Program been secured?</li> <li>No.</li> <li>Individual initiatives under the program may be funded by relevant government campaigns or other sources of funding.</li> </ul>
4	4. Timelines	
Time	elines	√ Established community pharmacy practice √ Immediate to short-term implementation (< 30 June 2015) – subsidised service □ Medium-term implementation(1 July 2015 to 30 June 2020) □ Longer-term implementation (> 1 July 2020)