

The Future of Pharmacy: A Deep Dive into Expanded Scope of Practice

Opinion Piece

Completed 2024

James Oh, Intern, BPharm (Hons) ^{1,2}

¹ College of Medicine and Dentistry, James Cook University, Townsville, Australia

² Education Chair, National Australian Pharmacy Students' Association, Australia

Pharmacists expanding their scope of practice has been one of the most prevalent topics this year in pharmacy. These changes are occurring not just in Australia but globally. However, pharmacists' scope of practice still varies significantly around the world, even between states. In countries such as England, which have been impacted by doctor shortages for much longer than Australia, pharmacists have a greater scope of practice, including independent prescribing, and it looks like we are following suit. Our practice is, and should be, driven by the needs of our patients.

I believe that the scope of practice for every health practitioner has its limits. You can not do everything, however, pharmacists are capable and willing to do more and the current healthcare system needs them to. Every health practitioner has their place and role within the healthcare system. To operate efficiently, every practitioner must practice safely, competently and in communication with each other. We all must work efficiently and cohesively with one another for our patients. Due to many compounding factors, the functionality of our health system is compromised and is not meeting the current demand. As a result, an expanded scope of practice is necessary, not just for pharmacists but for all regulated health professions. If a professional is qualified, competent, willing, and safely able to do more for the advancement of healthcare, legislation should not be a barrier.

As pharmacists, we can bridge this gap in healthcare. The recent trials allowing pharmacists' full scope of practice is

essential for people to get the care they need, and I believe we are in a unique position to aid in the current health crisis. Pharmacists are highly qualified health practitioners, specifically educated in the quality use of medicines. We are the most accessible healthcare professionals at the forefront of primary care and we are already seeing the patients who need us. We just aren't properly supported to practice at our full potential. Support should come in the form of legislation that allows us to practice and undertake additional training to perform at the scope we are capable of, and what our patients are demanding of us. Support is also financial, where the government should subsidize more pharmacy services for the people who can not afford them. Patients who require these additional services and more complex care should always be at the centre of these decisions.

Full scope of practice is the future of pharmacy — where we see the transition to a focus on clinical and service-based roles. These include prescribing, formulation of care plans, patient education, referrals, ordering and interpreting test results and imaging, and optimizing and dispensing medications for safe, timely, and quality access to medical care for Australians.

I believe that with more training, additional Continued Professional Development (CPD) modules, and short courses/grad. certificates, pharmacists will progress further in managing and diagnosing more conditions, which are often mismanaged and overlooked. If given the ability to do this side-by-side with our medical and allied health

colleagues, the beneficial impacts on health outcomes and access to quality healthcare would be undeniable, especially in rural and remote communities.

I have recently started my internship at a community pharmacy in rural Queensland (Modified Monash Model 4) and the disparity between supply and demand of quality healthcare is alarming. This is something that was introduced at university, but you do not fully understand it until you experience it for yourself. Last week, I encountered a patient who was discharged with a month's supply of metformin and a new diagnosis of Type 2 Diabetes. They were told nothing else. They didn't know what diabetes was, why they were taking this medication, what the medication did, or how to test their blood glucose levels. As frightening as it is, this is a daily occurrence with all types of conditions. Patients need access to quality, efficient, and comprehensive care, and developing a full scope of practice approach for pharmacists is heading in the right direction.

As we take on more roles and responsibilities, it is important to be mindful we can not do everything. As the pharmacist's role shifts, so does the dispensary staff's, particularly our dispensary technicians. Currently, their scope of practice is greatly limited and is almost always under the direct supervision of a pharmacist. This is incredibly time-consuming and can hinder workflow as the pharmacist's final check is the rate-limiting step when performing many daily tasks. To improve workflow, free pharmacists' time for longer consultations, and focus ourselves solely on patients, dispensary technicians must be able to operate semi-autonomously. With additional training, they should have the ability to provide basic healthcare advice, be able to operate more independently, and dispense regular and well-established prescription medications without direct supervision of a pharmacist. This is not to say that dispensary technicians should take on the role of a pharmacist, but their scope of practice must shift to better support us and the community pharmacy industry. To ensure that our dispensary technicians are better-equipped for the changes to come, more thorough training and regulation of who can practice under the title "dispensary technician" is needed. With semi-autonomous practice, dispensary technicians must also be legally responsible for their operations and decisions whilst practicing. Additionally, resources and CPD modules should be made available to them to support quality and safe practice as they progress through their career.

In conclusion, pharmacists can not do everything, but we can certainly do more. Our scope of practice should be determined by the needs of our patients, and we should be able to undertake additional training to be able to meet those needs. These new advancements should be supported by the Government to support and educate our dispensary staff, therefore better preparing them for the changes they will experience in their roles in the coming years.

REFERENCES

1. Sheshtyn P (2018). How the British do Pharmacist Prescribing. *Australian Journal of Pharmacy*,

CORRESPONDENCE

James Oh: james.oh@my.jcu.edu.au