

Prescribing and Dispensing Medicines in Australia

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Basis of Prescribing in Australia

National Medicines Policy and Pharmaceutical Benefits Scheme (since 1970s)

- The Pharmaceutical Benefits Scheme (PBS) is an Australian Government program that ensures access to essential medicines for Australians by subsidising medicines from the PBS List to make them more affordable.

How do medicines get on the list?

- The **Pharmaceutical Benefits Advisory Committee (PBAC)** (medical experts and specialists) is an independent statutory body established under the [National Health Act 1953](#) to make recommendations and give advice to the Minister about which drugs and medicinal preparations should subsidised and available on the PBS and how they should be used - diagnosis, dose, duration other conditions. The Committee considers the medical effectiveness, appropriateness and cost-effectiveness of a proposed benefit compared to alternative therapies. Maximum quantities and repeats are determined, and also restrictions for particular medicines.
- THEREFORE prescriptions written for PBS medicines must match all the conditions specified in the PBS list. It is easy now because the PBS computer software automatically prints a prescription according to all the rules. The software system includes the mechanisms for reimbursement to pharmacists. (It was initially all paper based!!)

What are Unrestricted, Restricted, and Authority Required Items?

- Listed medicines are referred to as **items** under the PBS. These medicines are supplied as an **Unrestricted, Restricted** or **Authority Required** item:
- **Unrestricted** medicines under the PBS Schedule may be prescribed by an authorised prescriber within their scope of practice at their discretion.
- **Restricted** medicines listed in the schedule, are only prescribed for conditions meeting the stated restrictions. Examples are restricted antibiotics and ‘specialist’ and new medicines.
- **Authority Required** medicines are prescribed for specific conditions to facilitate care. The process is streamlined by providing a streamlined authority code. *Authority Required* medicines are medicines that can only be prescribed if **prior approval** is obtained. The doctor can apply for authority for the majority of PBS medicines online at Services Australia.

Who can write prescriptions?

- Each prescriber (qualified and registered medical practitioner) must hold a valid PBS **Prescriber Number** (especially applied for) to write a valid PBS prescription for prescription only medicines. The prescriptions must either be computer generated or handwritten. If handwritten, the prescription must be in an indelible form in the prescriber's handwriting, and on standard PBS stationery. The prescription must be signed and dated by the prescriber and forward or back-dating is not permitted.

- All PBS prescriptions must contain the prescriber's name and address; the patient's name, address, and entitlement status; and endorsed PBS or RPBS. Prescriptions should completely identify the medicine being prescribed. The following should be defined:
 - Item (Generic name)
 - Form
 - Quantity
 - Dose
 - Strength
 - Instruction for use
 - Whether brand substitution is allowed

Who can **dispense** PBS medicine?

- **By Law:** Dispensers of PBS medicines must be approved and registered by the Department of Health and Aged Care. **Dispensers will only be pharmacists,** plus authorised doctors in certain remote and rural areas where there is no reasonable access to a pharmacist.

Authorities of different professions



The basic authorities for each category of health practitioner is outlined below:

Table 1: Types of authorities for different health professions

Practitioner type	Obtain	Possess	Administer	Supply	Dispense	Prescribe
Pharmacist	Y	Y	Y	Y	Y	
Medical practitioner	Y	Y	Y	Y		Y
Veterinary surgeon	Y	Y	Y	Y		Y
Dentist	Y	Y	Y	Y		Y
Dental therapist, Dental hygienist, Oral health therapist		Y	Y (under direction of a dentist)			
Nurse/Midwife		Y	Y			
Optometrist		Y	Y			
Podiatrist		Y	Y			
Endorsed practitioner*	Y	Y	Y	Y		Y
Paramedic		Y	Y			
Aboriginal health practitioner/worker		Y	Y			
Anaesthetic technician		Y	Y			
Vessel first aider	Y	Y	Y			

*Nurse, Midwife, Optometrist, Podiatrist

Some professions can also supply in limited circumstances under Structured Administration and Supply Agreements. For clarity, some

Australian dispensing doctors' prescribing: quantitative and qualitative analysis

A study undertaken to assess whether prescribing Drs were over-prescribing because of their dispensing role

- David Lim, Jon D Emery, Janice Lewis and V Bruce Sunderland
- Med J Aust 2011; 195 (4): 172-175
- Across some 80 sites in rural and remote Australia, there exists a unique model of general practice in which general practitioners, as part of their routine medical practice, both prescribe and dispense medicines to their patients. These dispensing doctors (DDs) are licensed to dispense pharmaceuticals subsidised by the Pharmaceutical Benefit Scheme (PBS) because there is no local access to a community pharmacy.
- **Conclusions:** Contrary to overseas findings, we found no evidence that Australian DDs overprescribed because of their additional dispensing role.

BY LAW: DISPENSED MEDICINES LABEL MUST COMPLY

- Name of patient, date, name of prescriber, name of pharmacy (or dispenser)
- Name of the medicine (generic name) and strength
- Dosage form (tablet, cream, etc)
- Dose prescribed
- Route of administration (oral, topical)
- Frequency of dosage (how often do they take it)
- Length of treatment (1 week, 1 month, or until finished - etc)
- Additional instructions (with food, on empty stomach etc)
- By Law: Dispensers must check to make sure that the dispensed product and all the above information is present and correct.
- ***If there are any changes, they must be recorded on the prescription and on the prescribing record, signed and dated.***
- Accurate complete retrievable records must be kept.

Clinical pharmacy is a further dimension of dispensing and a key pharmacist service to the community

- A relationship between good dispensing practices and good pharmaceutical care
- A team approach - communications with patients and their families and carers, other health professionals and the public
- Ongoing patient care and review including adverse drug reaction (ADR) monitoring
- Long term care and support of patients with, for example HIV and chronic diseases, and developing a monitoring strategy
- Monitoring medicines use in the community
- Systematic and complete documentation and record keeping in the dispensing process - a critical part of supporting a pharmacist's patient care



Pharmacist provides the correct advice for management of diarrhoea in children (plenty of fluids and ORS)

THANK YOU