

RACGP-commissioned review confirms pharmacist prescribing improves access to care

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The Pharmacy Guild of Australia says a review commissioned by the Royal Australian College of General Practitioners (RACGP) has confirmed the most important finding for patients: pharmacist prescribing improves access to treatment.

"The RACGP commissioned this review seeking to examine pharmacist prescribing and, despite its narrow scope and acknowledged limitations, the strongest conclusion is that pharmacist prescribing improves access to medicines and care," The Pharmacy Guild of Australia National Vice President Simon Blacker said.

"For patients, improved access means receiving treatment sooner, avoiding unnecessary delays and preventing minor conditions from becoming more serious health problems."

Mr Blacker said the findings aligned with recent independent modelling by HTANALYSTS.

The report, *Rewriting the Script*, found pharmacist autonomous prescribing could free up more than 10 million GP appointments and prevent more than 30,000 hospitalisations each year.

"The RACGP-commissioned review confirms pharmacist prescribing improves access to care. The HTANALYSTS modelling shows what improved access means in practice," Mr Blacker said.

"Every GP appointment freed up is an Australian who can see a doctor sooner. Every avoidable hospitalisation prevented is a better outcome for patients and less pressure on an already stretched health system."

Mr Blacker said the RACGP-commissioned review should not be viewed in isolation from the broader body of Australian and international evidence.

"What the report doesn't fully reflect is the extensive recent evidence demonstrating pharmacist prescribing is safe, effective and highly valued by patients.

"For example, the University of Newcastle's PATH-Urinary Tract Infection study found that more than 17,000 women accessed pharmacist-led urinary tract infection care, with nine in 10 patients satisfied or very satisfied, 79.4% reporting complete symptom resolution within seven days and pharmacists adhering to clinical protocols in 99% of consultations, demonstrating that community pharmacists can deliver safe, effective and accessible care for uncomplicated UTI."

Additional evidence published by the Guild today includes independent evaluations, systematic reviews and clinical research demonstrating:

Safe, clinically appropriate prescribing and strong patient outcomes in the NSW Community Pharmacy Trial and Victorian Community Pharmacist Pilot.^{1 2}

Safe antibiotic prescribing with high adherence to clinical guidelines in the Queensland UTI Pharmacy Pilot.³

Consistent international evidence supporting the safety and effectiveness of pharmacist prescribing.^{4 5 6}

Prescribing error rates of 0.7% for pharmacist prescribers compared with 9.8% for doctors.⁷

Outcomes equivalent to or better than usual care in a systematic review of 52 studies.⁸

Consistent evidence of safe prescribing, clinical effectiveness and high patient satisfaction across 43 reviews.⁹

Improved medication safety and prescribing quality without increased harm in a randomised controlled trial involving 882 participants.

Improved health outcomes, including better blood pressure and diabetes control, in 47 of 52 studies reviewed.¹¹

Mr Blacker said pharmacist prescribing operates within rigorous clinical governance arrangements, including protocol-driven care, escalation and referral obligations, structured assessment processes and regulatory oversight.

"Patient safety must always come first. Pharmacist prescribers undertake additional postgraduate education focused on clinical assessment, diagnosis, medication management and prescribing."

"That training builds on a pharmacy degree or master's qualification, a supervised internship, national registration requirements and ongoing professional development."

Mr Blacker said the real policy question was no longer whether pharmacist prescribing should exist, but whether Australians should continue to face unequal access to healthcare depending on where they live.

"Healthcare should not depend on your postcode. Patients in Queensland and the Northern Territory already benefit from safe, effective pharmacy-led care, and Australians elsewhere deserve the same access and choice."

"The RACGP report confirms pharmacist prescribing improves access. The broader evidence shows it is safe and effective. Australia now needs a nationally consistent approach to improve access, reduce delays and help more people get the care they need when they need it."

References

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