

CONSULTATION DOCUMENT

This document describes a proposal for changes to the provision of community pharmacy services to the Golden Bay region and seeks feedback from all interested parties.

1.0 Introduction

The Nelson Marlborough District Health Board (NMDHB) aims to ensure the best possible services are provided to the people of Nelson and Marlborough within the limited resources available. We believe change to our model of community pharmacy services is necessary to consider for the Golden Bay region because we believe options exist to improve the services currently provided for the people of Golden Bay within the funding we have available.

1.1 *Why are we considering a change?*

For many years pharmacy services have been provided in Golden Bay through a retail pharmacy model. A private provider is contracted through a Community Pharmacy Services Agreement (CPSA) which is used nationally by DHBs and details the services provided to the community (that are funded by the DHB) and the funding received by the provider from the DHB for these services. NMDHB believes that it may be able to provide a better service through a different model.

It is widely accepted by those involved in the health sector that we need to review the way we provide services, and how those services interrelate, in order to improve services for patients. This may result in changes, some of which may mean challenging ourselves about where, when and how those services are provided.

The current community pharmacy service available in Golden Bay:

- has a limited range of pharmacy services available to patients;
- is not directly linked to existing health services within Golden Bay Community Health (GBCH);
- has limited hours of operation with no service provision on weekends; and
- receives greater financial support than other health services as a result of the rural location.

1.2 *Consultation on proposal*

The purpose of this paper is to present one possible proposal for the delivery of community pharmacy services in Golden Bay. This proposal has been developed through discussion with clinicians, pharmacists, managers and other staff. We now need to understand the views of consumers, health care professionals, and existing service providers.

This consultation will inform us on:

- whether we should continue with the existing service provision as it is, or if the proposed change would deliver better services;
- what the downsides, or omissions of the proposed service are;

- what alternatives could be considered; and
- whether there are people that may not benefit from the proposal.

With this feedback we will be able to make a decision about how best to proceed: whether to alter the proposed model, whether to proceed with an alternative model or whether to have the services delivered in a similar (or the same) way to what is currently provided.

For the avoidance of doubt, this consultation is specific to the Golden Bay region and the provision of community pharmacy services in Golden Bay.

Details of how to provide feedback to the proposal and contact details are provided on page 7.

Submissions close 5.00pm on Friday 29th July 2016.

2.0 Proposed Model for Community Pharmacy Services in Golden Bay

A brief overview of the proposed model is as follows.

It is proposed that a dispensary would operate, with first preference being that the dispensary is located in the Golden Bay Community Health, which is at 10 Central Takaka Road, Takaka. This service would be the only NMDHB contracted provider of community pharmacy services in Golden Bay. It is expected that the service would operate Monday to noon Saturday at a minimum. As well as dispensing medicines and providing the usual advice and services a customer would expect from a pharmacy service, the dispensary would also be expected to provide extended pharmacy services that would improve and build on the current community pharmacy services available to people in the Golden Bay area.

These extended services include:

- medicine use reviews with those who are using multiple medications. Medicine use reviews allow patients to discuss their medicines and how they are used and identify any issues they are having with them. Pharmacists are able to look at overlaps or interactions between the patient's medicines and discuss these with the prescriber and the patient; and
- medicines optimisation services to the patients attending GBCH. Medicines optimisation means working with the residents and the GPs to ensure that the medicines the patient is on are appropriate and not having unintended consequences.

These additional services have been introduced elsewhere in New Zealand and are universally seen as being advantageous to the patient, clinicians and the health service overall. Studies show that these services are well supported by patients and help reduce adverse effects from medicines and help ensure the safe use of medications.

It is also expected that the service could offer improved input to clinicians on medication management issues at GBCH.

It is unlikely that the dispensary would sell cosmetics or other non-specialist items that you see in many pharmacies, although some pharmacy only and over-the-counter medications could be sold.

An advantage of the proposed model is that the pharmacy service would have close contact with the clinicians at GBCH. This would allow for an easier sharing of expertise on medication management and prescription related issues as well as clarifying patient care.

The service would be provided by a private provider, which would be identified through a Request for Proposal process. The Request for Proposal process would be designed to find out which provider can provide the best service in a sustainable manner.

More detail about the model follows, with some questions to consider.

2.1 Location of Service

The model proposed would see a pharmacy service established as part of GBCH. Although some discussion has occurred with Nelson Bays Primary Health, which operates GBCH, the exact location of the proposed pharmacy service within the Health Centre has not been defined yet, however there are a number of possible options for consideration.

As the proposal is for only one provider in Golden Bay this would mean that pharmacy services funded by NMDHB would no longer be available in the Takaka town centre. This may have advantages and disadvantages. For example, patients seeing the GPs at GBCH would be able to easily fill any scripts after their appointment as the dispensary would be in the same building. However, patients with repeat scripts, or patients who live outside the area, may have to travel further to have prescriptions filled.

For patients who cannot travel to obtain the medicines, there would be the continued opportunity for courier services to be utilised where possible.

Questions:

- The proposal represents a change in location for the service. Are there any difficulties that may be caused by this change in location which we have not considered?
- Are there any options we can consider for ensuring that those who live a distance from the dispensary can still retain good access to the services available?

2.2 The Clinical Pharmacy Model

The proposed service is a little different to a retail pharmacy as it is likely that there would not be a wide range of goods available for purchase. It is likely that a range of pharmacy only medications and some over-the-counter medications would be available, however it is likely that alternative medicines, cosmetics, sunscreens and other items found at a retail pharmacy would not be available so that the service can focus on clinical pharmacy services. These types of items are likely to be available through other retailers in Golden Bay.

The service would include a dispensary in GBCH which would be similar to the dispensary in any community pharmacy and a private consultation area would also be available. The private consultation area could be used for administering vaccines, taking and measuring samples, providing contraceptive or other advice to patients and undertaking medicine use reviews with patients, family and whanau, thus helping GBCH deliver care to patients.

It is envisaged that working at the same site as prescribers, nurses and other health professionals would help the pharmacists work with other clinicians to sort out any problems quickly and easily, avoiding inconvenience to patients and improving care.

Questions:

- Are there any concerns with operating a clinical pharmacy model rather than having a retail pharmacy that provides more goods available for purchase?
- Are there services which could or should be provided not outlined here?
- Is there anything that you can purchase now that won't be available under the proposed model and would no longer be available for purchase in the Golden Bay region?

2.3 Hours of Operation

Although there are financial limitations to the hours the pharmacy could be operated, we believe the service could be operated for longer hours under the proposed model than is currently the case; at a minimum increasing operating hours to include a Saturday morning service.

Question:

- What hours of operation will be important to ensure good access to services?
- How important is service availability at weekends?

2.4 Services and Contract

The advantage that we see of operating a dispensary at GBCH would be that it would allow a pharmacist to provide expert advice to the Aged Residential Care Facility, GPs and other clinicians that operate at the facility. A further advantage is that a dispensary at GBCH should allow for the development of the additional high level clinical services previously mentioned. It is therefore proposed that the CPSA would not be used as the contract for the service. Rather, it is expected that there would be a new contract stipulating a fixed amount to provide a range of services to the population that would be entered into with the successful provider following the Request for Proposal process.

The services that would be expected to be included are:

- core dispensing and advice to patients
- extended support to those with long term conditions
- medicine use reviews with those who are using multiple medications
- medicines optimisation services to the patients attending GBCH.

As explained below, it is expected that patients would not see any increase in what they would be paying for their DHB-subsidised medicines as a result of this proposed model.

The cost of medications would be refunded to the service provider as per the CPSA in place at the time with any shortfall not subsidised by the DHB (in accordance with PHARMAC's Pharmaceutical Schedule), being able to be collected by the pharmacy from the patient, just as is the case now.

Questions:

- Is the funding model of a fixed amount for a range of services appropriate?
- Are there other services that should be considered as priorities to be delivered in Golden Bay?
- Are there other approaches to the services and contract that should be considered?

2.5 Costs to Patients

Currently the prescription charge for each subsidised medication is typically \$5 for adult patients (although there are some exceptions to this). Prescriptions for those under 13 years of age are exempt from this charge. If the medicine is not fully subsidised there may be an additional cost to the patient. Once patients and their families have collected 20 prescription items in a year they can get a Prescription Subsidy Card, which means that they do not have to pay any more prescription charges until 1 February the following year.

Currently pharmacists can charge more for additional services in certain circumstances (e.g. providing services outside of normal business hours, or delivery of medicines) and there is no intention to change this under the proposed model.

It is proposed that this consumer cost framework would remain under the proposed model. It would be inequitable and not sustainable to charge any less for medications. NMDHB also has to ensure that Government policy and regulations are met in relation to patient charges.

Questions:

- Is there anything else that we need to consider in relation to costs to patients?

2.6 Single Provider

It is proposed that NMDHB would provide a contract for community pharmacy services funded by NMDHB to only one provider in Golden Bay and that the provider would deliver the model as proposed in this paper. Although there would be only one contract, it is expected that the service would provide adequate staffing to ensure good access to pharmacist services. With a relatively low population (particularly in winter) we feel only one provider of services funded by NMDHB is sustainable.

Questions:

- Are our assumptions about only one provider being viable in Golden Bay accurate?
- Is it appropriate to be offering only one contract for the provision of NMDHB-funded community pharmacy services in Golden Bay?

2.7 Process and Timeline for Appointing a Sole Provider of Services

Following the close date for submissions, NMDHB will consider all the submissions received as part of the consultation process and will make a decision on how to proceed in terms of NMDHB-funded community pharmacy services in Golden Bay. Depending on our decision (which will be made only following careful consideration of all consultation feedback), if NMDHB was to decide to move to the proposed model, as outlined in this section 2, a Request for Proposals would likely be issued in October for an eight week period. A provider would be appointed, based on an evaluation of the proposals, with services to start in 2017.

3.0 Where To Send Your Submission

You can provide your own comments or submission by email or letter. We have also provided question prompts in Appendix 1 and you can fill parts, or all of this, and send it to us. If using the template in Appendix 1 and you need further space under a question to provide your comments you should feel free to add further lines or pages as necessary.

A survey monkey or phone option is also available and detailed below.

Submissions close 5.00pm on Friday 29th July 2016.

You are invited to send your submission to:

Postal: Andrew Goodger
Strategy Planning & Alliance Support
Nelson Marlborough District Health Board
Private Bag 18
Nelson 7042

Email: gбайpharm@nmdhb.govt.nz

Phone: Andrew Goodger on 03 546 1501

SurveyMonkey: <https://www.surveymonkey.com/r/X79MMG5>

You can also attend the public meeting where comments and themes will be recorded. Dates and times for these will be:

TIME: 6.00pm
DATE: 4 July, 2016
VENUE: Senior Citizens Hall
88 Commercial Street
Takaka

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Are there any options we can consider for ensuring that those who live a distance from the dispensary can still retain good access to the services available?

Are there any concerns with operating a clinical dispensary model rather than having a retail pharmacy that provides more goods available for purchase?

Are there any services which could, or should, be provided that are not outlined here?

Is there anything that you can purchase now that won't be available under the proposed model and would no longer be available for purchase in the Golden Bay region?

What hours of operation will be important to ensure good access to services?

How important is service availability at weekends?

Is the funding model of a fixed amount for a range of services appropriate?

Are there other services that should be considered as priorities to be delivered in Golden Bay?

Are there other approaches to the service, service models and contract that should be considered?

Is there anything else that needs to be considered in relation to costs to patients?

Are our assumptions about only one provider being viable in Golden Bay accurate?

Is it appropriate to be offering only one contract for the provision of NMDHB-funded community pharmacy services in Golden Bay?

Do you have any other comments or suggestions to make about the proposed model? Are there any disadvantages to the new model we haven't considered?
