

## POSTER ABSTRACT

### A Rural Scope of Practice for Pharmacists

1<sup>st</sup> Asia Pacific Conference on Integrated Care, Brisbane, 06-08 Nov 2017

Kerri Louise Miedema

Olsen's Pharmacy (2002) Ltd, New Zealand

---

**Introduction:** Too few medical graduates opt to become general practitioners or family physicians, particularly in rural areas. Predicted to worsen in the next decade as current practitioners retire, to meet health needs it will be essential to make the best use of all available health professionals. Building on existing collaboration and with better use of technology, community pharmacists have the skills and knowledge to provide expanded services. A 'rural' scope of practice for pharmacists, allowing more autonomous practice, could improve health provision and pharmacist retention in rural areas.

**Objective:** To show how pharmacists could better meet the health needs of rural New Zealanders by providing accessible, safe and affordable care in line with New Zealand's health strategies.

**Targeted population:** Policy makers, health providers or funders, pharmacists and other health professionals practising in rural or provincial areas. Exemplified by the author's experience as a community pharmacist in Greymouth, a provincial town on the West Coast of New Zealand's South Island.

**Highlights:** There is a high reliance on locums due to the shortage of medical practitioners in rural areas. A lack of continuity of care has been associated with increased hospital admissions.

Community pharmacists are highly accessible with a quarter of New Zealand's population visiting a pharmacy every month.

Comparisons are drawn with changes in scopes of practice for New Zealand health professionals and developments in expanded pharmacist services in other jurisdictions; the United Kingdom and Canada.

There is potential for pharmacists to work more collaboratively with better integration, using technology to build on existing collegial relationships.

A role between the current 'pharmacist' and 'pharmacist prescriber' scopes of practice would allow more autonomous practice by pharmacists in rural or hard to staff areas.

Using existing linkages with university rural outposts could give pharmacists additional training and a transferable qualification while improving health care provision.

Various solutions are offered, to improve services available from rural pharmacists, including creating a vocational scope in rural pharmacy.

A 'rural' scope of practice, not available to urban pharmacists, fits with New Zealand's current health policy framework which encourages team work and top of scope practice.

**Transferability:** Rural scopes of practice apply in some medical and nursing fields. Expanded scopes of practice for pharmacists have been successful in other jurisdictions. Rural scopes of practice could be applied to pharmacists and other allied health professionals practising in rural or high needs areas.

**Conclusions:** Experience elsewhere shows pharmacists can use their skills to do more for patient care. Where offered, these services are safe, effective and well received by patients while improving pharmacist job satisfaction. They reduce presentations to medical practices or emergency departments, leading to better use of resources. By providing a richer professional environment, a rural scope of practice for pharmacists could incentivise relocation to areas difficult to staff.

---

**Keywords:** healthcare policy; workforce; pharmacist; rural; scope of practice

---