

## EXCLUSIVE INTERVIEW



The Pharmacy Guild of Australia's new event, the Pharmacy Connect (PC), is to be held at the Four Points by Sheraton in Sydney on September 9-10, 2016. Pharmacy owners and pharmacists looking for business solutions will find this conference delivers ways to build patient and customer loyalty, and informs about new services and markets. *Retail Pharmacy* proudly supports PC by featuring a number of exclusive interviews with the conference sponsors' senior executives and speakers.

## Adam Dubrich

PharmaPrograms Business Manager Adam Dubrich talks to *Retail Pharmacy* about a range of new professional programs to boost revenue.

**PharmaPrograms seems to have had a spectacular rise, with six programs in its first 18 months of existence and two new programs on the way. How did this rapid success come about?**

It certainly has been an exciting ride, which really began as a consultancy business advising the pharmaceutical industry that it had to work closer with community pharmacy, especially in the area of chronic therapy medicines. As we heard from many manufacturers and their required bespoke solution request, it became clear that we had to build a new IT-enabled process to deliver a specific protocol.

Encompassing this was respecting that pharmacists are busy health professionals and need to integrate systems into their workload. PharmaPrograms was born out of this process: 4,400 pharmacies have enrolled in at least one program, 86 pharmacy groups have adopted the programs, 4,300 doctors are participating. All pharmacy programs have been developed through the leadership of programs architect Kos Sclavos, and his industry experience is exceptional. It's inspiring to work with Kos and to experience his enthusiasm and passion for pharmacy.

**Patient support programs have been around for some years, so what is different about PharmaPrograms?**

Yes, patient support programs and patient familiarisation programs are not new, but the valuable role a pharmacist can play has been ignored in the past. Indeed, community pharmacy was bypassed, and they would be unaware such programs existed across the pharmaceutical sector.



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At PharmaPrograms we believe the pharmacist has a key role.

With many chronic therapy medicines, perhaps with five repeats, the pharmacist sees the patient six times for the one time they consult with their doctor. There is no possible way that medication compliance and medication persistence can be maximised without the pharmacist playing an important clinical role.

**Are pharmacists paid a professional fee above and beyond their usual remuneration for dispensing a product?**

Absolutely. The pharmacy receives additional remuneration above and beyond normal dispensing for the role they play in delivering the specific protocol for each program. While each program is different, there is generally a key quality use of medicines [QUM] component that the pharmacist needs to deliver. Those messages differ depending on which repeat is being dispensed. The IT systems help the pharmacist to know which service to provide and the printed material received by the patient is labelled with the pharmacy's details, ensuring that the patient knows it's the pharmacist who was providing the service.

Unlike other programs that refer patients to particular websites or

printed resources, we utilise the skills of the pharmacist to deliver the key messages. This is critical for better outcomes because it overcomes any language or communications difficulties that the patient may be experiencing. It's the pharmacist who can pitch the key QUM message and tailor it to the patient to maximise concordance.

**Are there specific disease states that suit these programs more than others?**

There really is no limit to these programs. Indeed, the current portfolio is diverse with inclusions across the antidepressant class, weight loss, osteoporosis and dermatology. We will soon have oral contraceptives and respiratory condition inclusions. The medications which the programs support are both PBS and private. We believe that as therapies become more complex, there will be an even greater role for pharmacy to play as a cost-effective solution to deliver QUM for manufacturers. Some companies give the medication-counselling role to nurses to provide phone support, but we believe the pharmacist is the medicines expert and the best health provider to be delivering their expertise.

**How do doctors and patients know which pharmacies are participating?**

Doctors and patients are advised of specific network pharmacies for specific programs via a pharmacy locator. As pharmacies enrol, their pharmacy details are automatically transferred to the pharmacy locator. Medical representatives detail doctors of the participating pharmacies in their area by use of the locator.

**Can any pharmacy join your programs?**

We do not exclude any pharmacy, on the condition that they are willing to comply with the protocol and to commit to the program rules. Some medications, by virtue of various prescribing restrictions, will not be suited to all pharmacies. For example, at present one of our programs is a hepatitis C therapy and there are limited specialist prescribers of these medicines across Australia. Another one of our products is a private hospital specialised medicine with a small number of prescribers. Based on recent discussions with potential clients, we believe that there will be adequate programs to access for every community pharmacy in Australia.

**How can pharmacies receive more information about PharmaPrograms?**

We have a dedicated website and through this portal pharmacists make their claims for payment in an automated fashion. The site also houses all program collateral, which supports pharmacists in implementing the programs.

[www.pharmaprograms.com.au](http://www.pharmaprograms.com.au) contact@pharmaprograms.com.au. <sup>RP</sup>