

Frequently asked questions

Doctor and pharmacist collaborative prescribing pilot

A collaborative prescribing pilot will be trialled at Lyell McEwin Hospital at the Northern Adelaide Local Health Network. Through this pilot, specially trained pharmacists will work in collaboration with doctors to understand a patient's needs, develop a medicine plan and prescribe medications. The model is known interstate and overseas as partnered pharmacist medication prescribing.

What is partnered pharmacist prescribing?

Through a partnered pharmacist prescribing model, credentialed pharmacists' partner with doctors to prescribe medication. This allows doctors and pharmacists to work together to provide a patient centred approach, combining their diagnostic and medication expertise at the time of prescribing.

How will the model work?

As part of the trial, the Minister for Health and Wellbeing, Chris Picton, has granted a licence for approved pharmacists within the Lyell McEwin Hospital to prescribe medication.

A pharmacist will be able to prescribe the medication in alignment with an agreed, documented medication management plan developed in partnership with the treating doctor.

The model enables pharmacists to support patient flow in partnership with the doctor and patient but does not interfere with the doctor's ability to prescribe at any point during the patient's care. Clinicians retain responsibility for diagnosis.

A similar model has been utilised in Victorian public hospitals since 2012.

What medication can be prescribed under this model?

The partnered pharmacist prescribing model will give selected pharmacists the licence to prescribe Schedule 2, 3 and 4 medications. This includes those used to treat high blood pressure, high cholesterol, and diabetes, as well as other regular medicines such as puffers, creams and ointments.

What are the benefits of this model?

The model has a number of benefits, including supporting patient flow by reducing length of stay, empowering and engaging patients in medication decision making and reducing medication errors.

It will enable doctors to be better supported in their roles by integrating pharmacy services more efficiently.

The similar trial in Victorian hospitals saw a reduction in medication errors and length of stay, and hospital cost savings.



Will this involve independent prescribing?

Under this model, appropriately credentialed pharmacists work closely with doctors to undertake a medication review and document the agreed medication management plan. The pharmacist prescribes the medicines in accordance with the agreed plan. It is a collaborative model and does not involve independent prescribing from the pharmacist.

Will this apply to all pharmacists working at Lyell McEwin Hospital?

This will only apply to appropriately credentialed pharmacists. To be credentialed, pharmacists must meet certain prerequisites, and complete training and assessment to demonstrate the required level of professional competence. Competence is determined by Senior Medical Doctors observing the pharmacists practice in real-life settings.

How long will the trial run?

The trial will begin in August 2023 at Lyell McEwin Hospital. An evaluation will be completed toward the end of the year with continual assessment throughout to optimise the integration of the model.

Will this model be expanded to other hospitals?

Following the evaluation of the trial, the partnered pharmacist prescribing model may be rolled out to other Local Health Networks once a licence to prescribe is granted.

For more information

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