

Pharmacists welcome Taskforce Recommendations



But IPU warns that ambitious implementation and funding plan required.

13 August 2024: The Irish Pharmacy Union (IPU) has welcomed the recommendations of the Expert Taskforce on the future of pharmacy services published today, stating that these recommendations when implemented could have a transformative effect on community healthcare. The IPU is now calling on the Minister for Health to realise this potential and agree to an ambitious implementation plan that adequately resources pharmacy care.

The Expert Taskforce made a total of 18 patient-focussed recommendations which when operational will provide significantly easier and quicker access for patients through the network of 1,900 community pharmacies across the country. The IPU has for many years been advocating for many of these changes particularly the introduction of a Common Clinical Conditions scheme.

Welcoming the recommendations, Tom Murray, President of the Irish Pharmacy Union said, “The

Taskforce and Minister Donnelly are to be commended for getting the process to this stage however a lot of work still needs to be done before implementation can happen. This will require all stakeholders engaging in a collaborative way and agreeing the various protocols and addressing all funding issues.”

Highlighting initiatives that will deliver a significant benefit Mr Murray said, “The introduction of a Common Clinical Conditions scheme could be among the most impactful changes in Irish Healthcare in decades. This will allow all people to access pharmacy care for minor conditions in the convenience of their pharmacy.”

He went on to say, “as the global problem of medicines shortages continues, we look forward to the introduction of a serious shortage protocol which will allow community pharmacists source a clinically appropriate alternative in the event of a particular medicine being in short supply, thereby ensuring that the patient is looked after in a timely manner.

“Extended prescribing is another initiative which should make matters more convenient and easier for patients,” Mr Murray added.

Central to this is supporting the vision of Sláintecare where access to services is based on clinical need not ability to pay and equal access to healthcare. This requires a sustainable pharmacy service and investment in pharmacy services is a key element to that.

Mr Murray said he now expects engagement with the Department of Health to progress these changes and the outstanding pay claim on the basis that there is an agreement that any new services and the pay claim would be dealt with in the round. “The IPU would recommend to members not to implement any new services until there was progress in respect of the pay claim,” he added.

“Community Pharmacists are effectively being paid less than they were in 2009 and the notion of layering on new schemes to an already underfunded and resourced group of healthcare professionals would not be credible, tenable or acceptable.”

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