S1.1
Integrating pharmacists into the general practice team
Angus Thompson BPharm(Hons) MSc
School of Pharmacy, University of Tasmania, Hobart, Tasmania

In this presentation, we will hear from a former UK Pharmaceutical Advisor and Prescribing Support Pharmacist about surmounting the barriers to a closer professional relationship with general practice, the skills that are required of practice pharmacists and the challenges inherent in the current model of Community Pharmacy in Australia.

Many of the challenges facing practicing primary care pharmacists in Australasia mirror those in the UK; however the faster evolution of the "general practice pharmacist" in the UK, is one area where the directions of travel have started to diverge significantly.

Whilst there may be parallels in terms of the strategic advice provided to GPs, with Primary Care Trust prescribing advisors in the UK providing similar input to the NPS Facilitators in Australia; that is where the similarities end.

Pharmacists are now increasingly embedded in many general practice teams across the UK. Initially funded by NHS organisations, a growing number are now resourced by practices directly, who have come to recognise the value of having a pharmacist working closely alongside other members of the practice team, including not only GPs and nurses, but IT and management colleagues.

With this change in resourcing, has come an evolution in the role of pharmacists working within practices. Whereas in the past, the raison d'être was almost always financial control; quality improvement, education, audit and provision of disease management clinics have become an increasingly important part of the practice pharmacist role in the UK.

S1.2
GP Super Clinics: what role for academia and what role for pharmacy?
P N Shaw
School of Pharmacy, The University of Queensland, QLD 4067

The Federal Government has initially committed $275 million over a five-year period from 2007-08 for the GP Super Clinic programme. This will provide 31 GP Super Clinics, nine of which are in Queensland and four in the south-east corner of the state. The programme is aimed at providing an improved focus on preventive health care, in doing so, seeking to co-ordinate health promotion and illness prevention. Another aim is that of drawing together community health services, allied health services and those provided by GPs. GP Super Clinics are also likely to "take pressure off local public hospitals" and will provide opportunities for high quality training in a multi-professional healthcare setting.

The promise of the delivery of primary preventive, multi-professional healthcare, leading to reduced chronic disease rates and a consequential decrease in healthcare costs has long been a key goal of health professionals but evidence for its effectiveness is not necessarily unequivocal. Despite this, the aim of improved primary healthcare remains a clear objective and has attracted a significant number of allied health professions and universities into GP Super Clinic partnerships.

The University of Queensland has an involvement in three GP Super Clinics and all of these have pharmacy associations to varying degrees. The roles played by the University and by pharmacy in these GP Super Clinics will be discussed in this presentation, with a focus on both service delivery and education