

MEDIA RELEASE

NEWS FROM THE UNIVERSITY OF TASMANIA

DATE: MONDAY 12 JULY 2010

ATTENTION: Chiefs of Staff, News Directors



UTAS pharmacy research to save Australians millions in healthcare costs

A new software solution for Australia's community pharmacists, based on UTAS research innovation, could save \$900m in healthcare costs.

The results, developed over 10 years by the School of Pharmacy's Unit for Medication Outcomes Research and Education (UMORE), has culminated in the Federal Government investing \$97m to roll out the software that assists community pharmacists perform and record clinical interventions.

Head of School and Chief Investigator, Professor Gregory Peterson, said the new software would achieve improved safety and effectiveness of medication use on the community.

Prof Peterson said the shift in service ethos would have the potential to improve patient care by increasing the use of pharmacists' expertise as part of an integrated health team.

"Clinical interventions occur when a pharmacist detects a medication-related problem such as an error or adverse event arising from the use of certain prescription medications," Prof Peterson said.

"A pharmacist's intervention can improve patient care through improved medication use and prevent hospitalisations caused by adverse medical events, potentially reducing pressure on hospital beds and saving the government about \$900m in healthcare costs."

Prof Peterson said over the next five years, community pharmacies will be provided with access to training, ongoing support and the software based on the work developed and trialled by UMORE.

The adoption of the UTAS research follows evaluation by clinical and economic experts of software installed in 185 pharmacies and used by more than 500 pharmacists in Tasmania, Victoria and New South Wales.

The UTAS project was in partnership with the University of New South Wales, University of Sydney, Monash University and Curtin University.

Research was funded by the Department of Health and Ageing as part of the fourth Community Pharmacy Agreement.

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