

Australian Nursing and Midwifery Federation

**Submission to the Australian
Government Department of
Health review of the National
Medicines Policy 2021**

2 March 2022



**Australian
Nursing &
Midwifery
Federation**



Australian Nursing and Midwifery Federation

Annie Butler
Federal Secretary

Lori-Anne Sharp
Federal Assistant Secretary

Australian Nursing and Midwifery Federation
Level 1, 365 Queen Street, Melbourne VIC 3000
E: anmffederal@anmf.org.au
W: www.anmf.org.au



INTRODUCTION

The Australian Nursing and Midwifery Federation (ANMF) is Australia's largest national union and professional nursing and midwifery organisation. In collaboration with the ANMF's eight state and territory branches, we represent the professional, industrial and political interests of more than 300,000 nurses, midwives and carers across the country.

Our members work in the public and private health, aged care and disability sectors across a wide variety of urban, rural and remote locations. We work with them to improve their ability to deliver safe and best practice care in each and every one of these settings, fulfil their professional goals and achieve a healthy work/life balance.

Our strong and growing membership and integrated role as both a professional and industrial organisation provide us with a complete understanding of all aspects of the nursing and midwifery professions and see us uniquely placed to defend and advance our professions.

Through our work with members we aim to strengthen the contribution of nursing and midwifery to improving Australia's health and aged care systems, and the health of our national and global communities.

The ANMF welcomes the opportunity to provide feedback to the Australian Government Department of Health on this next phase of consultation for the Draft National Medicines Policy (NMP), on behalf of our members.

Nurses and midwives, as registered health practitioners involved in medicines management and quality use of medicines, have a key role and responsibility in ensuring programs, systems and initiatives concerning medicines support all people living in Australia to achieve optimal health.

A clear, comprehensive, contemporary NMP will provide the foundation for best practice, person-centred, evidence-based, outcomes-focussed medicines use in Australia.



DRAFT NATIONAL MEDICINES POLICY CONSULTATION DRAFT SURVEY

1. Do you consent to the Department collecting the information requested in Citizen Space about you, including any sensitive information, for the purposes of consultation?

- Yes
- No

2. If you consent, the Department may, at its discretion, publish part or all of the information provided in your submission in the Review's Stakeholder Consultation Report (Report). If information from your submission is published, the Department may identify you and/or your organisation as the author of the submission, if you consent to being identified. Please note that your email address will not be published, and responses may be moderated to remove content that is inappropriate/offensive or contains sensitive information. Do you consent?

- Yes, I consent
- No, I do not consent

3. Please read and agree to the below declarations:

By making a submission, I acknowledge that:

- I understand that the giving of my consent is entirely voluntary;
- I am over the age of 18 years;
- I understand the purpose of the collection, use, publication, or disclosure of my submission;
- Where relevant, I have obtained the consent of individuals whose personal information is included in my submission, and consent to the Department collecting this information for the purposes outlined in this notice;
- I understand that, where I have provided consent to my submission being published, the Department has complete discretion as to whether my submission, in full or part, will be published.

I have read, understood and consent to the above statements.

4. What is your name?

Annie Butler, ANMF Federal Secretary.

5. What is your email address? If you enter your email address then you will automatically receive an acknowledgement email when you submit your response.

fedsec@anmf.org.au



6. Are you responding as an individual or on behalf of an organisation?

- As an individual
- On behalf of an organisation**

7. What is the name of your company and/or organisation? (if applicable)

The Australian Nursing and Midwifery Federation.

8. Which of the following options best matches the area of interest for you and/or your organisation?

- Nurses and midwives**
- Policy and program delivery**

9. May we contact you to ask you for more information, or to seek feedback on how the consultation was undertaken?

- Yes**
- No

10. Aim

The Policy's aim is to create the environment, in which appropriate structures, processes and accountabilities enable medicines and medicines-related services to be accessible in an equitable, safe, timely, and affordable way and to be used optimally according to the principles of person-centred care and the quality use of medicines, so that improved health, social and economic outcomes are secured for individuals and the broader community.

Using the scale below, please indicate your level of agreement with the Policy's aim.

- Strongly Agree**
- Agree
- Neither Agree or Disagree
- Disagree
- Strongly Disagree

Comments (1,000 words)

The stronger focus on medicines safety in the revised central pillars of the NMP is supported.

11. Scope

The Policy's scope refers to the term 'medicine' covers a broad range of products that are used to prevent, treat, monitor or cure a disease. These products include prescription medicines, over-the-counter medicines and complementary/traditional medicines and encompass biologic and non-biologic medicines, including gene therapies, cell and tissue engineered products and vaccines. This broad scope



ensures the policy is adaptive and responsive to new and emerging treatment options. It also recognises that the definitions of medicines may vary across Commonwealth, state and territory legislation and regulation. Notwithstanding, the Policy's principles and pillars are applicable to all the above products and their clinical use as well as being applicable to relevant future advanced therapies. The Policy's scope can be found on pages 2-3.

Using the scale below, please indicate your level of agreement with the Policy's scope.

● **Strongly Agree**

- Agree
- Neither Agree or Disagree
- Disagree
- Strongly Disagree

Comments (1,000 words)

This is a broad and inclusive scope that encompasses current and emerging medicines used for treatment and prevention of illness.

12. Principles

The Policy includes key principles, that should be evident in the planning, design and implementation of all policies, strategies, programs, and initiatives related to the Policy. These can be found on page 4.

Using the scale below, please indicate your level of agreement with the inclusion of each of the Policy's Principles and their descriptions.

Person-centred

● **Strongly Agree**

- Agree
- Neither Agree or Disagree
- Disagree
- Strongly Disagree

Equity

● **Strongly Agree**

- Agree
- Neither Agree or Disagree
- Disagree
- Strongly Disagree



Partnership-based

- **Strongly Agree**
- Agree
- Neither Agree or Disagree
- Disagree
- Strongly Disagree

Accountability and transparency

- **Strongly Agree**
- Agree
- Neither Agree or Disagree
- Disagree
- Strongly Disagree

Shared responsibility

- **Strongly Agree**
- Agree
- Neither Agree or Disagree
- Disagree
- Strongly Disagree

Innovation

- **Strongly Agree**
- Agree
- Neither Agree or Disagree
- Disagree
- Strongly Disagree

Evidence-based

- **Strongly Agree**
- Agree
- Neither Agree or Disagree
- Disagree
- Strongly Disagree



Sustainability

- **Strongly Agree**

- Agree
- Neither Agree or Disagree
- Disagree
- Strongly Disagree

Comments (1,000 words)

The amendment to the more inclusive language of person-centred is supported. This term is broadly applicable to the full range of health and aged care settings where medicines may be used. The broadening of equity as a key principle highlights the importance of taking positive action to work towards elimination of medicines inequities for at risk groups and is strongly supported. These groups include those who are frail, homeless, refugees, and people with mental illness, disability and chronic conditions. Reference to these cohorts should be detailed explicitly in the policy rather than being referred to as 'other vulnerable groups'.

The change of 'stewardship' to 'shared responsibility' and the introduction of the new principles of innovation, evidence-based and sustainability is also supported.

13. Enablers

The NMP influences, and is also influenced by, related policies, programs, and initiatives of the wider health system. Seven enablers are identified in the Policy as being critical to the Policy's success. These can be found on page 5.

Using the scale below, please indicate your level of agreement with the inclusion of each of the Policy's Enablers and their descriptions.

Health literacy

- **Strongly Agree**

- Agree
- Neither Agree or Disagree
- Disagree
- Strongly Disagree



Leadership and culture

- **Strongly Agree**
- Agree
- Neither Agree or Disagree
- Disagree
- Strongly Disagree

Health workforce

- **Strongly Agree**
- Agree
- Neither Agree or Disagree
- Disagree
- Strongly Disagree

Research

- **Strongly Agree**
- Agree
- Neither Agree or Disagree
- Disagree
- Strongly Disagree

Data and information

- **Strongly Agree**
- Agree
- Neither Agree or Disagree
- Disagree
- Strongly Disagree

Technology

- **Strongly Agree**
- Agree
- Neither Agree or Disagree
- Disagree
- Strongly Disagree



Resources

- **Strongly Agree**

- Agree
- Neither Agree or Disagree
- Disagree
- Strongly Disagree

Comments (1,000 words)

The ANMF are pleased to note that the recommended enablers that are critical to the Policy's success have been identified and included. These enablers are essential to achieving the NMP's aim and meeting the key principles.

14. Governance

The Policy describes a governance approach that is focused on co-ordination and shared problem solving and accountability. It also recognises that each partner is responsible and accountable for achieving the NMP's aim and intended outcomes. The Policy's governance section can be found on pages 7-8.

Using the scale below, please indicate your level of agreement with the proposed governance.

- Strongly Agree
- **Agree**
- Neither Agree or Disagree
- Disagree
- Strongly Disagree

Comments (1,000 words)

The emphasis of the proposed governance approach on all partners is supported. Figure 2 outlines the necessary partners that should be involved in and responsible for medicines governance, however, for absolute clarity, it is recommended that 'employers' are specifically referenced. Whilst employers may fall under the titles of responsible partners already included, this emphasis would support stronger governance in nurses and midwives practice settings.

15. Central Pillars

The Policy includes four Central Pillars. The function of these pillars is to guide and focus collective actions to deliver the Policy's aim. Each of these Pillars includes intended outcomes associated with their



realisation, a description of the Pillar including their related components, and key responsible partners. The Central Pillars can be found on pages 9-20.

Pillar 1: “Timely, equitable and reliable access to needed medicines at a cost that individuals and the community can afford”.

Using the scale below, please indicate your level of agreement with the Pillar, including its intended outcome, description and key responsible partners.

- **Strongly Agree**
- Agree
- Neither Agree or Disagree
- Disagree
- Strongly Disagree

Please select the relevant sections of the Pillar below should you wish to provide additional comments.

- Intended Outcome
- Description
- Key responsible parties

Additional comments (1,000 words)

Nil

16. Pillar 2: “Medicines meet appropriate standards of quality, safety and efficacy”.

Using the scale below, please indicate your level of agreement with the Pillar, including its intended outcome, description and key responsible partners.

- Strongly Agree
- **Agree**
- Neither Agree or Disagree
- Disagree
- Strongly Disagree

Please select the relevant sections of the Pillar below should you wish to provide additional comments.

- Intended Outcome
- ✓ **Description**
- ✓ **Key responsible parties**



Additional comments (1,000 words)

Description – for consistency of language, in the final sentence of paragraph 2 it should refer to ‘suitably qualified health practitioners’ rather than ‘suitably qualified health professionals’.

Key responsible partners – in the Responsible partners table under Health practitioners, reference to ‘patient’ should be removed. It should state ‘To support the person taking the medicine’s engagement in clinical trials, where appropriate.’

Key responsible partners – Professional organisations also provide evidence-based best practice guidance to health practitioners on prescribing, supply and administration.

17. Pillar 3: “Quality use of medicines and medicines safety”.

Using the scale below, please indicate your level of agreement with the Pillar, including its intended outcome, description and key responsible partners.

- Strongly Agree
- Agree**
- Neither Agree or Disagree
- Disagree
- Strongly Disagree

Please select the relevant sections of the Pillar below should you wish to provide additional comments.

- Intended Outcome
- Description**
- Key responsible parties**

Additional comments (1,000 words)

Description – under the heading ‘Promoting the quality use of medicines and medicines safely across the health system’, for consistency of language, paragraphs 1 and 3 should refer to ‘health practitioners’ rather than ‘health professionals’.

Description – the promotion of medicines safety appears to be weighted towards the individual health practitioner complying with best-practice guidance rather than the employer/organisation (industry) implementing policies and structures to enable health practitioners to achieve quality use of medicines and



medicines safety. It is recommended this wording is strengthened so that a systems approach (with defences, barriers and safeguards) to safety and quality is adopted by employers, rather than a person approach that focuses on the individual health practitioner.

Key responsible partners – in the Responsible partners table under All governments and Industry, for consistency of language it should refer to ‘health practitioners’ rather than ‘health professionals’.

18. Pillar 4: “Responsive and sustainable medicines industry and research sector with the capability, capacity and expertise to meet current and future health challenges”.

Using the scale below, please indicate your level of agreement with the Pillar, including its intended outcome, description and key responsible partners.

- **Strongly Agree**
- Agree
- Neither Agree or Disagree
- Disagree
- Strongly Disagree

Please select the relevant sections of the Pillar below should you wish to provide additional comments.

- Intended Outcome
- Description
- Key responsible parties

Additional comments (1,000 words)

Nil

19. Implementation

The NMP functions as a coordinating framework that sets out the Pillars and intended outcomes for all partners to work towards. As no single partner can be completely responsible for achieving the policy’s aim, its implementation approach is a collective responsibility appropriately documented at the program level by each partner. The Policy’s implementation approach is outlined on pages 21-22.

Using the scale below, please indicate your level of agreement with the proposed implementation approach.

- Strongly Agree
- **Agree**



- Neither Agree or Disagree
- Disagree
- Strongly Disagree

Comments (1,000 words)

Shared responsibility for implementation is supported. Examples of implementation mechanisms led by each of the responsible partners under each of the NMP's Pillars should be included in the document to provide direction and clear expectations for each group. There should be specific reference to employer responsibilities so as to focus on a systems approach rather than an individual practitioner-focused approach.

20. Evaluation

Australia's NMP describes the intended outcomes that the partners should collectively strive to achieve. The monitoring and evaluation of the collective progress towards the intended outcomes will enable the acknowledgement of achievements and identification of emerging priorities. The Policy's evaluation approach, including guidance for components of an evaluation strategy aligned to the NMP is outlined on page 23.

Using the scale below, please indicate your level of agreement with the proposed evaluation approach.

- Strongly Agree
- Agree**
- Neither Agree or Disagree
- Disagree
- Strongly Disagree

Comments (1,000 words)

It remains somewhat unclear as to how progress will be evaluated and how each policy partner will be expected to communicate evaluation results. Recognising that the scope of the NMP is to set the "direction and approach", it is recommended that detail on monitoring and measuring of implementation, and evaluation, of the NMP be made clear elsewhere by the Department of Health. Without this, achievement of the aim will be difficult to appraise.



21. General Comments

Please provide any additional comments you may have on the draft Policy.

For consistency, there should be a thorough review of the terminology used throughout, particularly the use of the terms consumer, patient, person, individual, health professional and health practitioner. The document would benefit from the inclusion of a glossary of terms.

CONCLUSION

Thank you for the opportunity to provide feedback to this phase of consultation on the Draft National Medicines Policy. It is pleasing to note that recommendations made in the initial consultation have been included in the revised draft.

Individual and community engagement and participation in health care, and by extension medicines use, is a key principle underpinning high quality, safe and effective health care and the shift to a person-centred focus for the NMP is welcomed. The ANMF reiterate the importance of a systems approach to safety and we stress the need for greater emphasis and clarity on this when detailing the responsibilities of partners (employers in nurses and midwives practice settings).

A comprehensive communication strategy with NMP partners should be developed and implemented once the review is completed to ensure awareness, engagement and use is maximised.