

MEDSCHECK INFORMATION AND CONSENT FORM

A MedsCheck is a service provided by the Pharmacist that includes a review of the medicines you are taking and education to assist you with managing your medications. The service aims to help to improve medicine use with the goal of improved health outcomes.

In order to receive a MedsCheck Service you need to be a Medicare and/or Department of Veterans' Affairs (DVA) cardholder who lives at home in a community setting. You must not have had a MedsCheck, Diabetes MedsCheck, Home Medicines Review or Residential Medication Management Review Service in the previous 12 months. Also, you need to be taking five or more prescription medicines, or have had a recent significant medical event, or are taking a medication associated with an increased risk of side effects.

Under this service the Pharmacist will:

- Assess your eligibility to receive the service
- Obtain informed consent from you to receive the service
- Ask you to bring all prescriptions and current medicines along to an appointment
- Check the medicines you have brought in against the Pharmacy dispensing records
- Talk to you about your medical conditions and any allergies you may have
- Teach you how to store and take your medicines correctly
- Develop and provide you with a copy of an accurate medicines list and written action plan
- Undertake follow up actions that may include contacting your doctor or other healthcare provider, and providing them with a copy of the medicines list and written action plan
- Upload a record of the Medscheck service to your My Health Record (if you have one)
- Collect personal and sensitive information from you to enable the Pharmacy to claim a payment for delivery of this service.

The Australian Government is paying the Pharmacy for the MedsCheck Service. You will not be charged an additional fee by the Pharmacy for this service.

You will still be required to pay to obtain the medicines that will be checked through this MedsCheck service including the PBS co-payment (if applicable) when medications are dispensed.

MEDSCHECK PATIENT CONSENT

Australian Privacy Principle 5 Notification under the *Privacy Act 1988*

Your personal information is protected by law, including the *Privacy Act 1988*.

Collection of Personal Information to allow payment to your Pharmacist

The Department of Health and Aged Care (the Department) and the Pharmacy Programs Administrator are collecting your personal information to verify your eligibility to receive the MedsCheck Service and enable the Pharmacy to claim a payment for the delivery of the service to you.

Personal information, details about your eligibility for the service, the medications you are taking and other health information will be collected by your Pharmacist and disclosed for this purpose.

If you consent to receive this service by completing and signing the consent form, your personal information will be collected for this purpose.

If you do not provide your consent to the collection of your information for this purpose, your Pharmacist will not be able to assess your eligibility for the service and you will not be able to access a funded MedsCheck Service. In this event, you may be required to pay for the cost of the service to your Pharmacist.

Further Information

The Department is unlikely to disclose your personal information to overseas recipients.

The Department can be contacted by telephone on (02) 6289 1555 or free call 1800 020 103 or by using the online enquiries form at www.health.gov.au

The Pharmacy Programs Administrator can be contacted by telephone on 1800 951 285 or email at support@ppaonline.com.au

The Department has a privacy policy which you can read at: <https://www.health.gov.au/using-our-websites/website-privacy-policy>

The Pharmacy Programs Administrator has a privacy policy which you can read at www.ppaonline.com.au

You can obtain copies of these privacy policies by using the contact details set out above. The privacy policies contain information about:

- How you may access the personal information the Department or Pharmacy Programs Administrator holds about you and how you can seek correction of it
- How you may complain about a breach of the Australian Privacy Principles and how complaints are dealt with.

MEDSCHECK PATIENT CONSENT

Acknowledgement

I have read or had explained to me, and understand, the contents of the MedsCheck Service Information and Consent Form.

Written Patient Consent

This may be filled in by the patient/carer/guardian.

- I consent to receive the MedsCheck Service and in doing so I consent to the collection of my personal information by the Pharmacy Programs Administrator and the Department to enable the Pharmacy to claim a payment for delivery of that service.

Signature		Date	
Print name			

If you are signing on behalf of the Participant, please indicate your relationship to the Participant:

- Parent or guardian of child
- Other – Please tick applicable category below:
- Enduring Guardian, recognised by a relevant State or Territory law
 - Enduring Power of Attorney, recognised by a relevant State or Territory law
 - A person recognised by a relevant State or Territory law
 - A person who has been nominated in writing by the Participant while the Participant was capable of giving consent.

This program is funded by the Australian Government Department of Health and Aged Care as part of the Seventh Community Pharmacy Agreement.



CONTACT THE SUPPORT CENTRE: 1800 951 285 | support@ppaonline.com.au