# Agreed Work Plan

|  |  |
| --- | --- |
| Aboriginal Health Service Name: | Outstation Name (if applicable): |
|       |       |
| Visit Dates: | Approval Number: |
|       |       |

Please indicate if the visit was conducted in the first or second reporting period:

|  |  |
| --- | --- |
| [ ]  0-6 months | [ ]  6-12 months |

Please refer to Guidelines and Standards for Pharmacists: The Provision of Pharmacy Services to Aboriginal and Islander Health Services (PSA 2005), Section 3.3 to assist you in completing the following.

## Medication storage and ordering

Guidelines 1a & 1c, pp5-6; Standard: Criterion 4, p14

|  |
| --- |
| Required service/s: |
|       |
| Agreed strategies: |
|       |
| Time frame: |
|       |
| Outcomes: |
|       |

## Cold storage and cold chain

Guidelines 1c & 1d; Standard: Criterion 4

|  |
| --- |
| Required service/s: |
|       |
| Agreed strategies: |
|       |
| Time frame: |
|       |
| Outcomes: |
|       |

## Types of medication

Guideline 1, p5; Standard: Criterion 4, 5 & 6

|  |
| --- |
| Required service/s: |
|       |
| Agreed strategies: |
|       |
| Time frame: |
|       |
| Outcomes: |
|       |

## Medication dispensing/supply

Guideline 1, p5; Standard: Criteria 4, 5 & 6

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| --- |
| Required service/s: |
|       |
| Agreed strategies: |
|       |
| Time frame: |
|       |
| Outcomes: |
|       |

## Ensuring medication compliance

Guidelines 3, 4, 5 & 6, pp.8-9; Standard: Criterion 5

|  |
| --- |
| Required service/s: |
|       |
| Agreed strategies: |
|       |
| Time frame: |
|       |
| Outcomes: |
|       |

## Medication record keeping

Guidelines 3, 4, 5 & 6 pages 8 & 9; Standard: Criterion 5

|  |
| --- |
| Required service/s: |
|       |
| Agreed strategies: |
|       |
| Time frame: |
|       |
| Outcomes: |
|       |

## Security

Guideline 1d, p.7; PSA Standard: Criterion 5

|  |
| --- |
| Required service/s: |
|       |
| Agreed strategies: |
|       |
| Time frame: |
|       |
| Outcomes: |
|       |

## Health provider knowledge of medication issues

Guidelines 2a, 3, 7,14 & 15, p.7, 8 & 10; PSA Standard: Criterion 5

|  |
| --- |
| Required service/s: |
|       |
| Agreed strategies: |
|       |
| Time frame: |
|       |
| Outcomes: |
|       |

## Other issues

PSA Standard: Criterion 5

|  |
| --- |
| Required service/s: |
|       |
| Agreed strategies: |
|       |
| Time frame: |
|       |
| Outcomes: |
|       |

*The following section is to be completed by Pharmacists participating in the NPS Outreach for Remote Aboriginal Health Services Program. Please also complete the activity log and evaluation questions at the end of this Work Plan and submit these with your six-monthly Progress Report.*

## NPS Outreach for Remote Aboriginal Health Services Program

PSA Standard: Criterion 5

|  |
| --- |
| Required service/s:e.g. deliver education sessions on early use of insulin and oral antidiabetic drugs to remote area nurses and Aboriginal Health Workers |
|       |
| Agreed strategies: |
|       |
| Time frame: |
|       |
| Outcomes: |
|       |

## Signatures

### Pharmacist providing Support Service

|  |  |
| --- | --- |
| Signature: |  |
|       |
| Full Name: | Date: |
|       |       |

### Pharmacy owner

|  |  |
| --- | --- |
| Signature: |  |
|       |
| Full Name: | Date: |
|       |       |

### AHS CEO/Medical Director

|  |  |
| --- | --- |
| Signature: |  |
|       |
| Full Name: | Date: |
|       |       |

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