

## **DIABETES MEDSCHECK INFORMATION AND CONSENT FORM**

**A Diabetes 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 type 2 diabetes. This service is aimed to assist you if you are unable to access other diabetes education or health services in your community. The service aims to help reduce your risk of developing complications from type 2 diabetes, and improve medicine use with the goal of improved health outcomes.**

In order to receive a Diabetes 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 unable to access existing diabetes education/health services and have been diagnosed with type 2 diabetes (in the last 12 months) or have less than ideally controlled type 2 diabetes.

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
- Help you understand the importance of keeping to your prescribed medicines schedule
- Educate you in effectively using blood glucose monitoring devices
- Help you to improve control of your blood glucose levels
- Develop and provide you with a copy of an accurate medicines list and written action plan
- Agree to follow up actions that may include contacting your doctor or other healthcare providers, and providing them with a copy of the medicines list and written action plan
- Agree to a record of the Diabetes Medscheck service being uploaded 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 Diabetes 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 Diabetes MedsCheck service.**

## **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 and the Pharmacy Programs Administrator are collecting your personal information to verify your eligibility to receive the Diabetes 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 Diabetes MedsCheck Service. In this event, you may be required to pay the cost of the service to your Pharmacist.

### **Further Information**

The Department and the Pharmacy Programs Administrator are 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](http://www.health.gov.au)

The Pharmacy Programs Administrator can be contacted by telephone on 1800 951 285 or email at [support@ppaonline.com.au](mailto:support@ppaonline.com.au)

The Department has a privacy policy which you can read at [www.health.gov.au/privacy](http://www.health.gov.au/privacy)

The Pharmacy Programs Administrator has a privacy policy which you can read at [www.ppaonline.com.au](http://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.

**DIABETES MEDSCHECK PATIENT CONSENT**
**ACKNOWLEDGEMENT**

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

**WRITTEN PATIENT CONSENT**

*This may be filled in by the patient/carer/guardian and physically handed to the Service Provider or electronically sent to the Service Provider.*

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

<b>Signature</b>		<b>Date</b>	
<b>Print name</b>			

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 as part of the Seventh Community Pharmacy Agreement.*

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

**DIABETES MEDSCHECK PATIENT CONSENT**
**VERBAL PATIENT CONSENT**

If it is not possible to obtain written patient consent during the COVID-19 pandemic the pharmacy may instead obtain verbal patient consent.

A patient's personal details must NOT be passed on by the pharmacy if the patient has not provided verbal or written consent for this to occur.

**To Read to Patient**

*Do you consent to the collection of your personal information by the Department and Pharmacy Programs Administrator to verify your eligibility to receive the Diabetes MedsCheck Service so that the pharmacy may claim a payment for delivering this service to you?*

Your Personal information includes:

- details about your eligibility for the service,
- the medications you are taking and
- other health information.

*If you do not provide your consent to the collection of your personal information, the pharmacist will not be able to assess your eligibility and the pharmacy may instead offer the service to you at your own cost.*

The person who obtains the Patient's verbal consent should fill in the section below.

- I have explained to the Patient what a Diabetes MedsCheck Service is and how their information will be used for the purpose of conducting a Diabetes MedsCheck Service under the Seventh Community Pharmacy Agreement
- The Patient has verbally provided consent for the pharmacy to collect and disclose their personal information to the PPA and the Australian Government Department of Health for the purpose indicated above.

<b>Patient Name</b>			
<b>Name of person who obtained verbal consent</b>		<b>Date</b>	

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