

STAGED SUPPLY SERVICE – PATIENT INFORMATION AND CONSENT FORM

Your doctor has requested that one or more of the Pharmaceutical Benefits Scheme (PBS) medicines you are taking should be provided to you in instalments. Another name for providing medicines in instalments is the Staged Supply of medicines. This could mean you get your medicines from your pharmacy daily or weekly, as directed by your doctor. The service aims to help to improve medicine use with the goal of improved health outcomes.

Under this program, the medicine provided through Staged Supply needs to be one or more of the following types: opioid analgesics; antipsychotics; anxiolytics; hypnotics and sedatives; antidepressants or psycho-stimulants.

In order to receive this service, you need to be a Medicare and/or Department of Veterans' Affairs (DVA) cardholder, hold a current Australian Government issued concession card, live at home in a community setting and have a referral to the service from your doctor.

Under this service the pharmacist will:

- Assess your eligibility to receive the service
- Obtain informed consent from you to receive the service
- Provide certain PBS medicines to you in instalments
- Store your remaining medicines
- Monitor your progress
- 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 Staged Supply 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 provided through this Staged Supply Service.

STAGED SUPPLY 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 Staged Supply 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 Staged Supply Service. In this event, you may be required to pay for 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.

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

The Department has a privacy policy which you can read at www.health.gov.au/privacy

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.



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ACKNOWLEDGEMENT

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

CONSENT

- I consent to receive the Staged Supply 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.

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 under the Seventh Community Pharmacy Agreement between the Commonwealth of Australia and the Pharmacy Guild of Australia.

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