

Election Costing Request Form

Details of request	
Party:	Liberals and Nationals Government
Name of Policy:	Expanded Scope of Practice for Pharmacists
Date of request:	19 February 2023

Description of policy	
Summary of policy (please attach copies of relevant policy documents and include information on what the policy aims to achieve):	<p>The policy continues reforms to expand the scope of practice for pharmacists through:</p> <ul style="list-style-type: none">• expanding the pharmacist prescribing trial for the treatment of UTIs to the renewal of scripts for the oral contraceptive pill (OCP);• covering patient consultation fees for the duration of the UTI and OCP trial, which is expected to be around \$20; and• empowering pharmacists to issue medical certificates to patients they consult for conditions subject to the trial. <p>The policy also confirms that a Liberal and Nationals Government will not change the requirement for community pharmacies to be owned by pharmacists.</p>
Has the policy been publicly released yet?	

Your estimated costing of the policy ¹						
	2022/23 \$'000	2023/24 \$'000	2024/25 \$'000	2025/26 \$'000	2026/27 and later years ² \$'000	Total \$'000
Impact on General Government Sector (GGS) net operating result ³	-	-	-	-	-	-
Impact on GGS capital expenditure ⁴						
If different from above, impact on total State Sector net financial liabilities ⁵						

Note: Has the policy been costed by a third party? Yes – the Ministry of Health
If yes, can you provide a copy of this costing and its assumptions?

Key assumptions made in the policy	
Does the policy relate to a previous announcement? If yes, which announcement?	The policy builds on the existing commitment to expand the scope of practice for pharmacists in NSW.
What assumptions have been made in deriving the financial impacts in your estimated costing? <i>(See checklist)</i>	<p>The below assumptions have been made in costing this policy.</p> <ul style="list-style-type: none"> • \$3m grant to the University of Newcastle consortium to expand the trial • \$2m for UTI and OCP consultation costs: <ul style="list-style-type: none"> ○ UTI consultation costs of \$240,000 ○ OCP consultation costs of \$1,686,680 ○ Admin costs of \$302,000 • Commitments to pharmacist owned pharmacies has no cost

¹ Amounts should be expressed in nominal dollars. GGS - General Government Sector.

² Please provide information on other years if spending occurs outside the forward estimate years and will be required to cost the policy or will assist in public understanding of the policy.

³ Negative for a saving that reduces expenditure

⁴ Negative for a reduction in capital expenditure.

⁵ Only required if proposal is outside GGS. Negative for a reduction in net financial liabilities.

	All costs are to be absorbed by the Ministry of Health.
Is there a range for the costing or any sensitivity analysis that you have undertaken?	N/A
Are there associated savings, offsets or, in the case of a revenue proposal, offsetting expenses? If yes, please provide details.	N/A
Are there significant costs or savings outside the forward estimates period which should be considered in costing this policy? ⁶	N/A

Administration of policy	
Intended date of implementation:	April 2023 for UTI trial, July 2023 for the contraceptive pill
Intended duration of policy:	Each trial will last for 12 months
Who will administer the policy (e.g. Government entity, non-government organisation, etc.)?	Ministry of Health
Are there any specific administrative arrangements for the policy that need to be taken into account (e.g. agreements between different levels of government)?	N/A
Are there transitional arrangements associated with policy implementation?	N/A

If the policy is mainly an expenditure⁷ commitment	
Demand driven or a capped amount:	The trials will be demand driven.
Eligibility criteria or thresholds:	N/A

If the policy is mainly a revenue commitment	
Transaction based or capped:	N/A
Thresholds and/or exemptions:	N/A
Collection method:	N/A
Additional expenditure associated with collection:	N/A

⁶ Particularly important for large projects with long lead times, policies with a delayed timetable for implementation, or policies where up-front investment is required to achieve long term savings.

⁷ Expenditure is operating expenses, e.g. salaries, interest cost and grants. Expenditures are fully included in the impact on operating balance.

If the policy is mainly a capital costs⁸ commitment	
Nature of Capital Spending	
Type of work, size and capacity:	N/A
Proposed start and completion date of work:	N/A
Intended construction schedule/cashflow:	N/A
Associated asset sell off (if any):	N/A
Recurrent Impacts	
Offsetting expenditure savings:	N/A
On-going maintenance, depreciation and operational expenses:	N/A
Third party funding involvement:	N/A
Delivery model ⁹	N/A

⁸ Capital costs differ from expenditure in that only depreciation will be included in the impact on operating balance.

⁹ There is a range of possible delivery models, e.g. built, owned and operated by a NSW government agency; built and transferred to a private operator; privately built for public operation; privately built and operated with government assuming risk or providing a guarantee in relation to future income (often applicable to public/private partnership arrangements), and so on. The policy should provide assumptions about the proposed delivery model.